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#### McCUTCHEN, BLACK, VERLEGER & SHEA

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August 3, 1989

Ms. Alisa Greene U.S. Environmental Protection Agency Region IX (T-4-1) 215 Fremont Street San Francisco, California 94105

Re: Hawker Pacific Inc./San Fernando Valley (EPA Reference T-4-1)

Dear Ms. Greene:

Enclosed is the response of Hawker Pacific Inc. to EPA's CERCLA § 104/RCRA § 3007 letter dated in February 1989, requesting information regarding the company's facility at 11310 Sherman Way, Sun Valley, California 91352. I spoke with you by telephone a few weeks ago and you agreed to an extension in submitting the document. It took slightly longer than I anticipated to get the documents ready due to my being out of my office part of the time.

As the response states, we are aware of no evidence indicating that Hawker Pacific's facility has had any release that could have contributed to the regional groundwater problem. Please notify me if you have reason to believe otherwise.

( ) ( Aun ( )

Michael A. Mohahan

of McCutchen, Black, Verleger & Shea

MAM/ph

RICHARD J. DENNEY
MICHAEL A. MONAHAN
LAURA J. CARROLL
MCCUTCHEN, BLACK, VERLEGER & SHEA
600 Wilshire Boulevard
Los Angeles, California 90017
(213) 624-2400

Attorneys for HAWKER PACIFIC INC.

BEFORE THE UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

In re Hawker Pacific, Inc., facility at 11310 Sherman Way, Sun Valley, California; San Fernando Valley Groundwater Investigation

EPA Reference T-4-1

TO REQUEST FOR INFORMATION

PURSUANT TO 42 U.S.C. § 9604(e)

# TO REQUEST FOR INFORMATION PURSUANT TO 42 U.S.C. § 9604(e)

This response is made by Hawker Pacific Inc. ("Hawker Pacific") to the request for information under 42 U.S.C. §§ 9604 and 6907 made by the United States Environmental Protection Agency ("EPA") by letter dated February 1989, addressed to Robert E. (Bob) Wilson, regarding Hawker Pacific's facility at 11310 Sherman Way, Sun Valley, California 91352. This response does not constitute any admission by Hawker Pacific that it has contributed to or is responsible for the San Fernando Valley groundwater contamination referred to in the EPA's request, and Hawker Pacific denies any such contribution or responsibility.

The following sets forth each question in the EPA request, followed by Hawker Pacific's response thereto.

1. A description of the purpose and operations of your facility including a detailed description of any hazardous waste storage, treatment, or disposal operations. Include the dates of operation.

#### Response:

Hawker Pacific overhauls and repairs, and manufactures, aircraft landing gear and flight control equipment at this facility. It has conducted operations at the site since April 1, 1987, when it purchased assets for that purpose from Inchcape PLC. At that time, its facility included Buildings 1 through 4

(see Response to Request No. 3, below). In December 1987, its facility was expanded to include Building No. 5.

Hawker Pacific's operations at the site consist of receiving and inspection of material and equipment, machining and grinding, plating, painting, assembly and testing of new and reassembled equipment.

Operations at the site generate the following waste streams:

- 1. Plating shop wastes: (a) Plating shop production trash consisting of tape and masking materials is collected in steel drums. (b) Spent plating baths are periodically pumped out of the equipment and absorbent is added to it in steel drums. (c) Plating tank sludge also is periodically pumped out and absorbent is added in steel drums. (d) Plating operations rinse water is directed to a clarifier tank prior to discharge to the publicly owned treatment works ("POTW"). Clarifier sludge is periodically pumped out, and dewatered using an onsite press. The sludge is placed in steel drums, and the water is returned to the clarifier tank. Steel drums of all these plating shop wastes are hauled offsite to a permitted disposal site.
- 2. Several other types of miscellaneous liquid wastes are generated by the equipment used at the site: machinery waste oil, water soluble coolant from metal-working machinery, magnetic particle oil used for product testing, spent hydraulic fluids, degreasing solvents and paint thinners and solvent. These liquids are collected in steel drums and shipped offsite for recycling or disposal.

Steel drums in which the waste is accumulated are stored temporarily in a paved storage compound in the yard at the facility. These operations and waste streams have remained essentially the same since Hawker-Pacific began operations at the facility.

- 2. A detailed description of all hazardous substances and hazardous wastes that were or are used or produced in operation or in production-related processes at your facility(s). Of particular importance is your information regarding past and present chlorinated solvent usage including but not limited to carbon tetrachloride (CTC), trichloroethylene (TCE), and tetrachloroethylene (PCE). For each substance and each waste used or generated, provide the following information.
  - a. The common chemical name, specific chemical name, and chemical composition by volume for liquids and weight for solids;
  - b. The total amount, in gallons for liquids and tons for solids, or annual usage or generation;
  - c. The methods and processes used to generate, store, treat, and dispose of, and otherwise handle each substance;
  - d. When and where the above processes occurred and are occurring. Please specify dates and locations as precisely as possible. Location information should include, but not limited to, information pertaining to tanks, ponds, treatment facilities, and other units which were historically used to treat, store and/or dispose of hazardous substances but which may no longer exist.

#### Response:

The following is a list of the hazardous materials used, stored, or produced at this site:

Liquid Wastes:
Shell Tellus Oil
Hydrocarbon Mixture 99%
55 Gallons a Year Usage
Used for lubricating machinery in the machine shop areas in Buildings 1 and 2.
Disposed of by recycling off-site

Shell Garia Oil-CHydrocarbon Mixture 99%
50 gallons a year usage
Used for lubricating machinery in the machine shop areas in
Buildings 1 and 2
Recycled off-site

Trichloraethane
Trichloraethane 1.1.1. 100%
600 Gallons a Year Usage
Used for degreasing machined parts in the plating shop area in Building 2
Recycled off-site

Red Oil
Hydraulic Fluid H-5606
Mixture 99% CAS# 64742-46-2, 64741-97-5, 64742-53-6
250 gallons a year usage
Used to fill and test hydraulic units before shipment, in the test room in Building 3
Disposed of by recycling off-site

Methylene Chloride
Methylene Chloride 100% CAS# 75-09-2
50 gallons a year usage
Used in assembly of the components in the assembly department in
Building 3
Recycled off-site

Rho-Solv 1204
Rho-Solv 1204 100% CAS# 64742-89-8
1200 gallons a year usage
Used to clean parts and machinery in Buildings 2, 3 and 4
Recycled off-site

Mag-Oil-C
Deodorized Kerosene 96% Parafins, 2% Benzene
200 gallons a year usage
Used in magnetic particle inspection equipment in solvent tanks
in NDT (non-destructive testing) Department in Building 2
Recycled off-site

Rubbing Alcohol
Isopropyl Alcohol
60 gallons a year usage
Used to clean hydraulic equipment during assembly process in
Building 3
Recycled off-site

Chase 310
Lacquer Thinner 22% Toluene, 50% Ketone, 5% Glycolethers, 22%
Petroleum Hydrocarbons
150 gallons usage
Used for cleaning parts to be painted, paint gun cleanup and thinning of paints in Building 4
Recycled off-site

MEK
Methyl Ethyl Ketone 100% CASE# 78-93-3
70 gallons a year usage
Used for cleaning parts in plating and assembly and test
departments in Buildings 2 and 3
Recycled off-site

Water Soluble Coolant
Waste Oil and Water
3000 gallons a year usage
Used for cooling during grinding and metal working in machine
shop areas in Buildings 1 and 2
Recycled off-site

#### Solid Wastes:

Cyanide/Cadmium Waste
3/4 cubic yards a year
Plating tank sludge, spent plating solution in plating shop in
Building 2
Land fill disposal

Nickel Waste
3/4 cubic yards a year
Plating tank sludge, spent plating solution in plating shop in
Building 2
Land fill disposal

Chromium Waste
7 cubic yards a year
Plating tank sludge, spent plating solution in plating shop in
Building 2
Recycled off-site

Metal Hydroxide Waste
2 cubic yards a year
Waste water treatment solids from the treating of metal finishing
rinse water
Recycled off-site

Oil and Grease Waste
3/4 cubic yards a year
Residue from oil product drums, from storage tank for water
soluble coolant in yard storage
Recycled off-site

#### Production Trash:

Masking Tape and Materials From Building 2 plating shop as described in response to request No. 1 above Land Fill Disposal

All of the materials referred to above are used in and handled by machinery, vessels, other equipment, piping or drums (both before and after becoming waste or recyclable materials) located above concrete or paved floors or pads so that any liquid leak or release would be promptly visible, with two exceptions: The plating waste water clarifier tank in Building 2 is partially below grade, and hydraulic fluid (red oil) and related compressor oil drips used for testing equipment are captured with compressor condensate water in two small sumps (approx. 18" x 18" x 18" each) located next to each other outside Building 3. A sample boring has been placed in the location of the plating clarifier. (See Response to Request No. 8.) The integrity of the two small sumps is and has been readily ascertained by visual inspection.

3. Any photographs, maps, diagrams regardless of their date, which show areas where hazardous substances or hazardous wastes have been made or may be located.

#### Response:

See enclosed facility diagram, document "A".

4. A description of past and present disposal practices of hazardous substances and hazardous wastes generated or used at your facility. If off-site disposal of wastes has occurred, please provide a detailed description, including copies of manifests of hazardous substances and hazardous wastes, the names and addresses of transporters that have ever been engaged for the purpose of transporting hazardous substances or hazardous wastes from your facility, and the location to where the waste was hauled.

#### Response:

See responses to Requests 1 and 2, above. Hawker
Pacific's past and present hazardous waste disposal practices
are: All hazardous substances for disposal are profiled (sampled
and analyzed), packaged and transported by an approved
transporter to a disposal site or recycler that is authorized to
accept that substance.

Enclosed are copies of manifests covering from 1987 to present date, document nos. HP000001 - HP000042.

Transporters used:

Disposal Control Inc. 1369 W. 9th Street Upland, CA 91786

King & King Drain Oil Service 635 Obispo Long Beach, CA 90814

Locations to which materials were hauled are shown on the manifests.

5. Locations and detailed descriptions of all monitoring wells, supply wells, injection wells, and underground tanks at your facility.

#### Response:

One underground tank, which has not been used by Hawker Pacific, recently has been discovered at the back of Building 1,

between Buildings 1 and 2. (See diagram supplied in Response to Request No. 3.)

6. Is your facility(s) currently connected to a sewer line? If so, please identify the sewage system, date of connection, and types of wastes discharged. If you are or at some time operated your facility(s) without a sewer line connection, please identify the method of waste water disposal that you use or did use. Specifically, have you or are you using leach field(s), septic tank(s), or any other method of onsite disposal.

#### Response:

Site Buildings Nos. 1, 2, and 4 are connected to a POTW sewer line. Waste streams discharged into this sewer are biological waste, and plating rinse waters that have been pretreated as described in Response to Request No. 1, above. These sewer connections have been in place since Hawker Pacific began operations at these portions of the site in April 1987.

Buildings Nos. 3 and 5 are connected to septic tanks with leach lines. These have been in place since Hawker Pacific began operations at these portions of the site, in April and December 1987, respectively.

7. All analyses from sampling of monitoring and supply wells, underground tanks, soil samples, and soil-gas sampling conducted at your facility. Please include any reports written by consultant(s) about these sample analyses.

#### Response:

Pursuant to direction of the California Regional Water Quality Control Board, Los Angeles Region ("LARWQCB"), on December 1, 1988, Law Environmental Inc. performed a subsurface investigation at two locations on this site to determine if any

subsurface contamination to soil or ground water had occurred.

The report is produced herewith, document "B".

8. Are you or your consultants planning to perform any investigations of the soil, water (ground or surface), geology, geohydrology, or air quality on or about the site? If so, please describe the planned investigation(s).

#### Response:

Hawker Pacific has been requested by California

Regional Water Quality Control Board to perform an additional two
borings in the area of Building 3 and 5 to a depth of 40 feet as
well as two borings inside Building 2 to a depth of 10 feet.

Final results are not yet received. Air emissions testing was
conducted February 13, 1989 by Truesdail Labs to determine total
and hexavalent chrome from this facility's three hard chrome
plating tanks.

9. A list of all current and former employees, agents, contractors, consultants, company officers, and other personnel who may possess knowledge or information relevant to this inquiry. This list should include each individual's name, address, telephone number, and job title or function.

#### Response:

<u>Name</u>	Address & Phone No.	<u>Title</u>	Term. Date
Erik Johnson	6722 Whitsett No.Hollywood, CA 91606 (818) 765-3589	Hazardous Wast Process Superv	•
Harry Gunn	530 N. Myers Burbank, CA 91506 (818) 848-0472	Machine Shop S	upv.
Bud Bailes	6730 Van Noord No.Hollywood, CA 91606 (818) 762-4856	Plater Journey Lead	man/
Ed Conley	Deceased 6-8-88		

Name	Address & Phone No.	<u>Title</u>	Term. Date
Stan LaSalle	2414 Minuteman Way Costa Mesa, CA 92626 (714) 545-0036	EPA/Hazardous Waste Engineer	3-4-88
Lewis Augustin	e 723 E. Chevy Chase Glendale, CA 91205 (818) 247-4229	Supervisor Sr.	7-31-87

10. Length of time your company has been at the site location and any information you have regarding former occupants of this location and their hazardous waste practices.

#### Response:

Hawker Pacific has occupied this site from April 1, 1987, except it has occupied Building 5 since December 1987. Prior operators at the site excluding Building 5, based on information and belief, were:

Inchcape PLC.	6-1 <b>-</b> 82 ·	to 4-1-87			
Parker Corp.	Approx.	1980 to 6-	-1-82		
Bertea	Approx.	1979-1980			
Zero Corporation	Approx.	1977-1979			
Canoga Industries	Approx.	1968-1977			
Stellar Hydraulics	Approx.	1963-1969	(Buildings	1	and
			2 only)		

Some of these may not have occupied the entire site of Buildings 1 - 4.

The company occupying Building 5 immediately prior to Hawker Pacific was Laura Scudder. Hawker Pacific lacks information as to other prior occupants of Building 5.

11. Any information regarding use and disposal of chlorinated solvents by any person or business in the San Fernando Valley.

#### Response:

Hawker Pacific objects to this request as beyond the scope of EPA's authority. Without waiving this objection, Hawker Pacific produced herewith copies of manifests relating to prior operators at this location that Hawker Pacific possesses, as documents no. HP000043 - HP000128.

12. A descriptive list of all insurance policies held by your company. The description should include the dates during which each policy was in force, the general type of policy (e.g., comprehensive, general liability, automobile), the insurance company issuing the policy, the policy number, and any specific provision of the policy which may relate to claims for environmental damages.

#### Response:

See document entitled "Hawker Pacific Inc. Insurance Policy List, document "C", produced herewith in a separate envelope labelled as confidential information. This document and the information contained therein is confidential and subject to 40 C.F.R. § 2.203(b), and is to be so treated.

13. A detailed description of all hazardous substance and hazardous waste spills, leaks and incidents, as well as any clean-up actions undertaken during the history of your facility's operation.

#### Response:

No known spills, leaks or incidents during Hawker Pacific's operation at this location.

14. A list of the names and addresses of all solvent suppliers and solvent recyclers from which either products or services were acquired for use by your facility.

#### Response:

Rho-Chem Corp Supplier and recycler P.O. Box 6021 H25-Isis Ave. Inglewood, CA 90301

PRI Recycler 1835 E. 29th Street Signal Hill, CA

DeMenno-Kerdoon Recycler 2000 N. Alameda Street Compton, CA 90222

Casmalia Resource Management Recycler NTU Road Casmalia, CA 93429

Shell Oil Co. Supplier 14117 Aetna Van Nuys, CA 91408

Holchem Chemical Supplier 13546 Desmond Street Pacoima, CA 913131

15. An audited set of financial statements which includes a Statement of Financial Position/Balance Sheet, Income Statement, and Statement of Changes in Working Capital, and any other supplementary information for your company's most recent fiscal year.

#### Response:

See financial statements, document "D", produced herewith in a separate envelope labelled as confidential information. This document and the information therein is confidential subject to 40 C.F.R.§ 2.203(b), and is to be so treated.

16. Are you owned by another corporate entity as a subsidiary, division, or otherwise?

#### Response:

Yes. See document produced in response to Request No.

DATE: JULY 7, 1989

RICHARD J. DENNEY
MICHAEL A. MONAHAN
LAURA J. CARROLL
MCCUTCHEN, BLACK, VERLEGER & SHEA

Michael A. Monahan

Attorneys for HAWKER PACIFIC INC.

I, Robert E. Wilson, Vice President and General Manager of Hawker Pacific Inc. (the "Company"), directed employees under my supervision in a search for records in the possession of the company and in interviewing company employees with knowledge of the company's operations, chemical use and business practices, for purposes of preparing the responses to which this is attached. I believe that the search and interviews were diligent and, based thereon, that the factual responses to which this is attached are correct.

DATE: July 7, 1989

ROBERT E. WILSON

SUBSCRIBED AND SWORN TO BEFORE ME

Level 8- Decento.

OFFICIAL SEAL
LUIS E ZURITA
NOTARY PUBLIC - CALIFORNIA
LOS ANGELES COUNTY
My comm. expires JAN 8, 1991

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## PARTIALLY SCANNED OVERSIZE ITEM(S)

See document #  $\frac{2190017}{\text{for partially scanned image(s)}}$  (1 of 1)

For complete hardcopy version of the oversize document contact the Region IX Superfund Records Center at (415) 536-2000

"B"



3420 N. SAN FERNANDO BLVD. SUITE 200 BURBANK, CALIFORNIA 91504 818-848-0214 PANAFAX 818-848-1674

January 4, 1989

Hawker Pacific, Inc. 11310 Sherman Way Sun Valley, California 91352

Project No. 58-8601 RWQCB File No. AB104.0436

Attention: Mr. Erik Johnson

Hazardous Waste Engineer

Gentlemen:

REPORT

Subsurface Investigation AB-1803 Follow-up Program

11310 Sherman Way

Sun Valley, California

#### INTRODUCTION

Law Environmental, Inc. is pleased to submit this report of subsurface investigation at the above-referenced property. The investigation was requested by the Regional Water Quality Control Board (RWQCB) in their September 6, 1988 letter to Mr. Erik Johnson (Appendix A). This report addresses all elements of the required investigation which concern subsurface investigation and associated laboratory analysis (Items 2 and 4a). Other requirements of the September 6, 1988 letter are/will be addressed in documents provided to the RWQCB by Hawker Pacific.

Our professional services have been performed using that degree of care and skill customarily exercised under similar

circumstances by reputable consulting engineers and geologists practicing in this or equivalent localities. No other warranty, expressed or implied, is made as to the information or professional advice included in this report. This report has been prepared expressly for Hawker Pacific, Inc. to be used solely for the purposes of the required RWQCB AB-1803 investigation. The report has not been prepared for use by other parties and may not contain sufficient information for other parties or other uses.

All findings and conclusions derived from measurements or analyses of soil, water, air and/or gas are based on the conditions which existed only at those particular sample locations and the times of sampling. The analytical results reflect the range of accuracy and detection levels, when specified, for the particular analytical equipment and/or specific analytical method(s) used.

#### FIELD INVESTIGATION

#### **METHODS**

Our field investigation was conducted on December 1, 1988. Three soil borings were completed to a depth of 10 feet at the locations indicated on Plate 1, Site Map. Boring B-1 was drilled



approximately one foot from the berm surrounding the TCA tank at the rear of Building 2. Boring B-2 was drilled approximately two feet from the berm surrounding the waste oil tank. Boring B-3 was drilled within the drum storage area.

All borings were drilled using a truck-mounted hollow-stem auger with an outer diameter of eight inches. Undisturbed samples were collected and preserved in accordance with the Soil Sampling Protocol in Appendix B. Samples from each boring were monitored in the field for the presence of volatile organic compounds using a Foxboro OVA 108GC (OVA). This unit is calibrated to a methane standard and provides a direct readout with a sensitivity of about one part per million (ppm) for most fuel hydrocarbons and organic solvents. Nine soil samples (three from each boring) were transported to Brown and Caldwell Laboratories in Pasadena for analysis.

#### **GEOLOGY**

Up to one foot of fill soils consisting of silty sand to sandy silt were encountered in our borings. The fill was underlain by recent alluvium consisting of a light brown, medium to coarse-grained sand with a trace of silt. This sand persisted to the bottom of our borings. Details of the geology are shown on the boring logs included as Appendix C.



Previous work in this vicinity indicates that deeper materials at this location are generally characterized by coarse sands and gravels. Los Angeles County Flood Control District data suggest that the depth to ground water at this location is in excess of 150 feet.

#### **OBSERVATIONS**

Ground water was not encountered in any of our borings. No visual or olfactory evidence of soil contamination was observed. No OVA readings were obtained from the borings which were in excess of background values.

#### ANALYTICAL RESULTS

In accordance with RWQCB requirements, all analyses were performed by a State and EPA-certified laboratory. The laboratory report and associated chain-of-custody documents are included in Appendix D. Samples from depths of 1, 5 and 10 feet in each boring were analyzed discretely for volatile organic compounds by EPA Method 8240.

Only one compound, methylene chloride, was detected in the soil samples. A fairly uniform concentration, 5 to 16 parts per



billion (ppb), was identified in all 9 samples. Methylene chloride is a commonly used solvent in the laboratory. Brown and Caldwell Laboratories has determined that the reported methylene chloride concentrations are due to laboratory contamination. This is stated in the letter from Brown and Caldwell which follows the laboratory report. Even so, the levels detected are well below the Drinking Water Action Level of 40 ppb recommended by the State of California Department of Health Services (January 1987).

#### CONCLUSIONS

Our investigation has not detected the presence of volatile organic compounds within the investigated areas of the subject property. The low levels of methylene chloride detected by the laboratory are believed to be the result of laboratory contamination.

-000-

One copy of this report should be submitted to the RWQCB by January 6, 1989. This extension was granted by Ms. Mila Sylvestre at the request of Law Environmental on December 21, 1988.



It has been a pleasure to have been of service to you on this project. If you have any questions regarding this report, please contact the undersigned.

Yours very truly,

LAW ENVIRONMENTAL, INC.

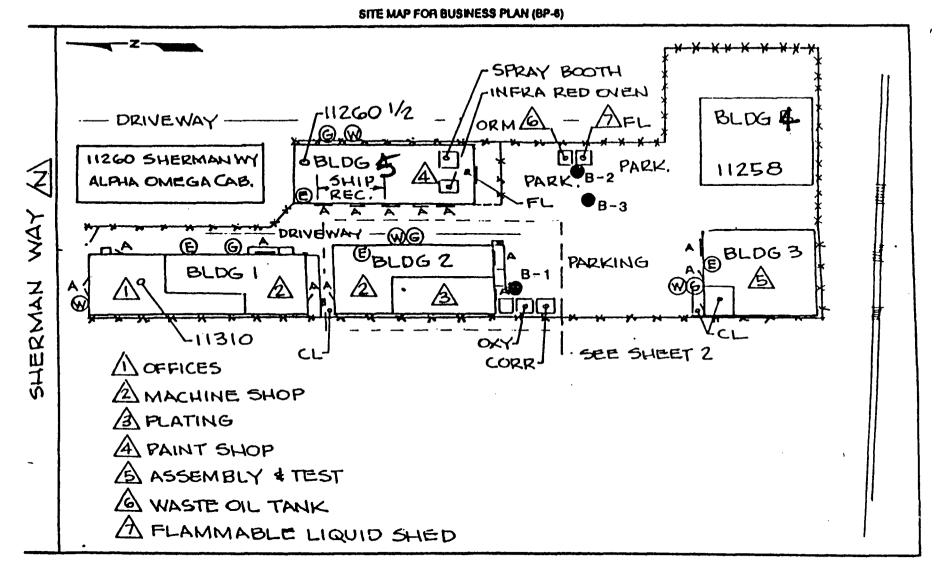
by Warre W. Dwas Warren W. Gross Staff Hydrogeologist

Jack Carmody, Manager Environmental Assessment

Glenn A. Brown, C.E.G. 3 Senior Vice President

WG/gla/8601.RPT Attachments

(3 copies submitted)



BASE MAP BY HAWKER PACIFIC

NO SCALE PROVIDED

B-1 BORING LOCATION
AND NUMBER

SITE MAP



#### CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD— LOS ANGELES REGION

107 SOUTH BROADWAY, SUITE 4027 LOS ANGELES CALIFORNIA 90012-4596 (213) 620-4460



September 6, 1988

Mr. Erik Johnson Hazardous Waste Engineer HAWKER PACIFIC INC. 11310 Sherman Way Sun Valley, CA 91352

SUBSURFACE INVESTIGATION - AB1803 FOLLOW-UP PROGRAM (FILE NO. AB104.0436)

On August 31, 1988, your facility was inspected by Mila Silvestre and John Hostak of this Regional Board's staff. The inspection focused on past and present methods used for handling chemicals and wastes at your facility. During the site visit, the inspectors became aware of certain situations that may have resulted in soil and potential ground water contamination. Of primary concern are the areas listed below:

- A. Industrial Waste Clarifier System inside the Plating Shop. This clarifier receives solution overflow from the plating tanks. There is a 1,1,1-Trichloroethane (TCA) degreasing tank located within the plating area. Any spillage or leakage from this degreasing tank therefore gets mixed with the plating solution overflow and finally discharged into the industrial waste clarifier.
- B. Aboveground TCA Holding Tank Containment Area at the rear of the Plating Shop. This containment area is currently constructed to standards, i.e., with berms and concrete bottom. However, the area has been retrofitted only less than a year ago (per Mr. Erik Johnson). Prior to retrofitting, the condition of this area and the method of handling the solvent within this area are not known.
- C. Cooling Tower Area in front of the Hydraulic Test Room. At the time of inspection, there was ponded water on the concrete slab underneath the cooling tower. Blowdown from this cooling tower appears to be being discharged onto the ground through a discharge valve located at the bottom of the tower. Since the concrete slab is not bermed, the wastewater eventually flows down onto the asphaltic The discharge of wastes to land without waste discharge requirements fom the Regional Board is a violation of Section 13260 of the California Water Code. If said discharge has been occurring, you are hereby ordered to discontinue this unacceptable activity immediately.

D. Chemical and Waste Barrel Storage Area located between the Warehouse and the Paint Shop. There are signs of past chemical spillage in the asphaltic concrete throughout this area. Although there is a berm on the south side of this area, it does not provide adequate containment of spills and/or protection from surface runon or runoff.

The main objective of this Agency's AB1803 follow-up inspection program is to determine possible sources of contamination in nearby drinking water wells. This program is comprehensive since even small discharges may have significant additive effects on the quality of ground water in the area.

You are therefore directed to submit a workplan for conducting a subsurface investigation to determine whether infiltration of contaminants into soils has occurred at the two areas of concern.

Your workplan must incorporate the site specific requirements listed below and all of the items contained within the enclosed Workplan Requirements for Initial Subsurface Investigation.

- 1. Industrial Waste Clarifier Area. In order to initially determine the integrity of the industrial waste clarifier system, the entire unit must be evacuated to remove all sludge and waste waters, steam cleaned and then visually inspected for any cracks and/or leaks. Please notify my staff prior to the date you plan to commence this activity so we can schedule an inspector to be present. In addition, a sample of the sludge must be analyzed for pH, Metals, Volatile Organics, Total Oil and Grease, Flash Point, and any other analysis required to determine if this material must be handled as a hazardous waste.
- 2. TCA Holding Tank Area. A minimum of one (1) shallow test boring to a depth of 10 feet below land surface is required immediately adjacent to the TCA holding tank containment area to determine whether past solvent handling practices have affected subsurface conditions in that area. Samples shall be obtained at the 1-ft, 5-ft, and 10-ft depths.
- 3. Cooling Tower Area. A written report must be submitted to indicate your current method of disposing the blowdown water from your cooling tower. Also, a list of the water treatment chemicals being added to the cooling water must be provided in the report to determine the need for additional work in this area.

- 4. Chemical and Waste Barrel Storage Area. a) A minimum of two (2) shallow test borings to a depth of 10 feet below land surface is required in this area. Samples shall be obtained at the 1-ft, 5-ft, and 10-ft depths in each boring location. b) Retrofitting of this area is required to provide adequate containment of all barrels stored, to control any spills, and to preclude surface runoff waste from leaving the area. A retrofitting plan must be submitted to this Board for review and approval.
- 5. Finally, since your facility operates a private sewage disposal system onsite, the following information regarding this system must be provided:
  - a. location of the disposal system(s),
  - b. the type of system(s) operated,
  - c. materials of construction,
  - d. size and capacity of the unit(s),
  - e. aerial extent of any associated disposal fields,
  - f. types and quantities of wastes discharged,
  - g. number and locations of connections to the system(s), and
  - h. results of any analytical testing required for operations and maintenance. This information will be reviewed and a determination made regarding the need for any subsurface investigation in this area.

The workplan containing all of the information identified above is due to this Regional Board by October 31, 1988. Enclosed for your convenience is a list of consulting firms that may be able to assist you in conducting the subsurface investigation.

If you have any questions concerning this matter, please contact Mila Silvestre at (213) 620-4930.

David a Bacharowski

Environmental Specialist IV

Enclosures

cc: Ms. Patti Cleary, U.S. EPA Region IX

Mr. Bill Jones, L. A. County, Dept. of Health Services

Mr. Publio Aliwalsa, City of Los Angeles Bureau of Sanitation

### SOIL SAMPLING PROTOCOL

The following procedures are followed when sampling soil with the hollow-stem auger drilling technique.

- 1. Continuous flight, hollow-stem augers are used.
- 2. All augers, samplers and downhole equipment are steam cleaned prior to use and between borings. This minimizes the possibility of cross-contamination occurring.
- 3. A registered geologist or other appropriately trained personnel observes the drilling, visually logs the soils, and obtains soil samples at appropriate intervals (usually 5 feet) as determined by field conditions.
- 4. The Unified Soils Classification System (USCS) is utilized to classify the soils. Rocks are classified according to the Colorado School of Mines "Classification of Rocks."
- 5. The soil samples are obtained using a modified California split-spoon sampler, which accommodates two to six sample tubes. Various tubes are utilized to accommodate the different analyses required:

Brass Tubes: 2 1/2 by 3 or 6 inches - for all organics and general analyses, excluding copper and zinc.

Stainless Steel Tubes: 2 1/2 by 3 or 6 inches - for all organics and metals analyses excluding chrome and nickel.

- 6. The tubes are scrubbed with a brush and TSP or equivalent cleaning agent, then rinsed with tap water. If required, the tubes are steam cleaned. Tubes are given a final rinse with distilled water and delivered to the drilling site in closed buckets or equivalent to preclude recontamination.
- 7. After the sample tubes are removed from the sampler, the latter is completely disassembled and scrubbed in TSP or equivalent and tap water. The sampler is rinsed with tap water, and distilled water (if required) and reassembled with the required number of clean tubes.
- 8. Unclean tubes are washed with TSP or equivalent solution, rinsed with tap water, etc. as described in 6 above.
- 9. In loose soils, a sand catcher is used to prevent soil from falling out of the sampler.
- 10. The sampler is driven 12 or 18 inches at each sampling. Generally, the lowest tube is retained for analysis. The other tube or tubes are retained for split sampling or as a back-up.

- 11. The sample is logged in. After testing for the presence of combustible gases or volatile organic compounds, the sample is capped with Teflon liners and tight-fitting plastic caps to minimize leaching and cross-contamination. Black vinyl electrical tape is used to tightly secure the caps to the sample tube. The samples are labeled and preserved in clean ice chests containing Blue Ice or equivalent, to keep the samples at or about 4 degrees Celsius.
- 12. The samples are kept in the ice chest until delivered to a state and EPA certified testing laboratory, the same day if physically possible. The undelivered samples are stored or archived in secured Law Environmental sample storage at or about 4 degrees Celsius. A freezer is also available at Law Environmental if freezing samples is required or recommended.
- 13. All samples are accompanied by a chain-of-custody form, documenting the time, date, and person-in-charge since retrieval of the sample from the sampler.
- 14. In case of visual and/or olfactory evidence of contamination, soil cuttings are impounded in drums carrying cautionary labels. The drums are secured from random contact. Custody of the drums and their content will remain with the client at all times.
- 15. If chemical analysis of the soil indicates the presence of elevated levels of pollutants, then the Client will be informed of the test results and advised as to the lawful means of disposal or detoxification. Upon the written request and authorization by the Client, Law Environmental will organize the disposal or detoxification of the impounded soil in accordance with all applicable federal, state, county and local regulations.
- 16. The soil sample tube label includes:
  Job Number
  Boring Number and Depth
  Sampling Date
  Sampler's Initials
  Test to be Performed (if known at the time of sampling).
- 17. An indelible marking pen or a ball-point pen is used to mark the sample tubes.
- 18. A detailed log is kept of all field activities.



#### BORING LOG

CHNER Hawker Pacific	PROJECT NO. 58-860/
LOCATION 1/3/0 Sherman Way, Sun Valley	BORING No. B-/
DRILLED BY <u>Or:11-Line</u>	PAGE/_ of/
DRILLING METHOD Hollow Stem Auger -	DATE /2-/-88
SCREHOLE DEPTH 10 feet BOREHOLE DIA. 8 inches	LOGGED BY MM
DESCRIPTION OF	
	T - fine-grained, some clay.
ML slightly plastic, dam	T - fine-grained, some clay, p, medium brown.
SAND - medium to coarse	grained trace of silt, dry
3 - to damp, while to	prained trace of silt, dry
5 -	
6 -	
7	
9 - \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
2	
3 7	
4	
5 -	·
6	
7 -	
Remarks:  End boring at ten feet	Ground Woter not
encountered. No Cavi	ing. No unusual adors
internal or soil discoloration	ň
sampled interval	



#### BORING LOG

OWNER H	Hawker Pacific	PROJECT No. 58-860/
LOCATION	11310 Sherman Way, Sun Valley	BORING No
	Dr:11-Line	PAGE / of /
DRILLING MET	THOO Hollow Stem Auger	DATE /2 -/-88
,	DESCRIPTION OF MA	LOGGED BY MM
13/8/3	Ca S S DESCRIPTION OF MA	TERIALS
1 - 2 - 3 - 4 - 5 - 5 - 5 - 7 - 8 - 9 - 9 - 0 - 0 - 10 - 10 - 10 - 10 - 1	SM 2" As phaltic Paving  FILL-SILTY SAND - Very Fixe  Medium brown  SAND - Medium to coarse g  to domp, white to	rained, trace silt, dry
1 - 2 - 3 - 5 - 6 - 7 - 8 - 9 - interve samples	encountered. No Caving or soil discoloration.	Ground Water not. No unusual adars



#### BORING LOG

OWNER Hawker Pacific	PROJECT NO. 58-860/		
LOCATION 1/3/0 Sherman Way, Sun Valley	BORING NO. 8-3		
	PAGE / of /		
DRILLING METHOD Hollow Stem Auger	DATE /2 -/-88		
BOREHOLE DEPTH 10 feet BOREHOLE DIA. 8 inches			
DESCRIPTION OF	MATERIALS		
1	79		
SAND - medium to Coarse	e grained, trace silt damp		
to moist-moisture	increasing with depth,		
Tight brown.			
3 -			
5 - 2			
6 -			
7 -			
8 -			
9       .			
1 -			
2 —			
3 7			
4			
5			
6 -			
7			
Remarks:			
encountered. No Cavi			
or soil discoloration			
interval sampled interval			



#### **BROWN AND CALDWELL LABORATORIES**

#### **ANALYTICAL REPORT**

373 SOUTH FAIR OAKS AVENUE, PASADENA, CA 91105 (818) 795-7553 (213) 681-4655

FAX: (818) 795-8579

LOG NO: P88-12-019

Received: 01 DEC 88 Reported: 09 DEC 88

Mark Miller
Law Environmental
3420 N. San Fernando Rd., Suite 200
Burbank, CA 91504

Project: 58-8601

#### Page 1 REPORT OF ANALYTICAL RESULTS DATE SAMPLED LOG NO SAMPLE DESCRIPTION, SOIL SAMPLES B-1 1' 01 DEC 88 12-019-1 01 DEC 88 B-1 5' 12-019-2 01 DEC 88 12-019-3 B-1 10' 01 DEC 88 12-019-4 B-2 1' 12-019-5 01 DEC 88 B-2 5' 12-019-1 12-019-2 12-019-3 12-019-4 12-019-5 PARAMETER Vol.Pri.Poll. (EPA-8240) 12/06/88 12/06/88 12/06/88 12/06/88 12/06/88 Date Extracted 1 1 Dilution Factor, Times 1 1 1 1 <5 <5 <5 <5 **<**5 1,1,1-Trichloroethane, ug/kg **45 <5 <**5 <5 1,1,2,2-Tetrachloroethane, ug/kg <5 <5 **<**5 <5 <5 1,1,2-Trichloroethane, ug/kg **<**5 **<**5 <5 **<**5 **<**5 **<**5 1,1-Dichloroethane, ug/kg <5 <5 **<5** <5 <5 1,1-Dichloroethylene, ug/kg <5 <5 <5 <5 1,2-Dichloroethane, ug/kg <5 <5 <5 **<**5 <5 <5 1,2-Dichlorobenzene, ug/kg **<**5 <5 <5 <5 <5 1,2-Dichloropropane, ug/kg <5 <5 <5 <5 <5 1,3-Dichlorobenzene, ug/kg <5 <5 **<5** <5 cis-1,3-Dichloropropene, ug/kg <5 <5 **<**5 <5 **<**5 **<**5 1,4-Dichlorobenzene, ug/kg **<5** <5 <5 **<**5 **<**5 2-Chloroethylvinylether, ug/kg **<**5 <5 **<**5 <5 **<**5 2-Hexanone, ug/kg <50 <50 <50 <50 Acetone, ug/kg <50 <50 <50 <50 <50 <50 Acrolein, ug/kg Acrylonitrile, ug/kg <50 <50 <50 <50 <50 <5 <5 <5 Bromodichloromethane, ug/kg <5 <5 <5 Bromomethane, ug/kg <5 <5



#### BROWN AND CALDWELL LABORATORIES

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Project: 58-8601

#### REPORT OF ANALYTICAL RESULTS

Page 2

LOG NO SAMPLE DESCRIPTION,	SOIL SAMPL	ES		DA	TE SAMPLED
12-019-1 B-1 1' 12-019-2 B-1 5' 12-019-3 B-1 10' 12-019-4 B-2 1' 12-019-5 B-2 5'					O1 DEC 88 O1 DEC 88 O1 DEC 88 O1 DEC 88 O1 DEC 88
PARAMETER	12-019-1	12-019-2	12-019-3	12-019-4	12-019-5
Benzene, ug/kg	<5	<5	<5	<5	<5
Chlorobenzene, ug/kg	<5	<5	<5	<5	<5
Carbon Tetrachloride, ug/kg	<5	<b>&lt;</b> 5	<5	<5	<5
Chloroethane, ug/kg	<b>&lt;</b> 5	<5	<5	<5	<5
Bromoform, ug/kg	<b>&lt;</b> 5	<b>&lt;</b> 5	<5	<5	<5
Chloroform, ug/kg	<5	<5	<5	<b>&lt;</b> 5	<b>&lt;</b> 5
Chloromethane, ug/kg	<5	<5	<5	<5	<5
Carbon Disulfide, ug/kg	<b>&lt;</b> 5	<5	<5	<5	<5
Dibromochloromethane, ug/kg	<b>&lt;</b> 5	<5	<5	<5	<b>&lt;</b> 5
Ethylbenzene, ug/kg	<5	<5	<5	<5	<5
Freon 113, ug/kg	<b>&lt;</b> 5	<5	<5	<b>&lt;</b> 5	<b>&lt;</b> 5
Methyl Isobutyl Ketone, ug/kg	<b>&lt;</b> 5	<5	<5	<5	<5
Methyl Ethyl Ketone, ug/kg	<50	<50	<50	<50	<50
Methylene Chloride, ug/kg	16	6	6	5	5
Tetrachloroethylene, ug/kg	<5	<5	<5	<5	<5
Styrene, ug/kg	<5	<5	<5	<b>&lt;</b> 5	<5
Trichloroethylene, ug/kg	<5	<5	<5	<b>&lt;</b> 5	<5
Trichlorofluoromethane, ug/kg	<5	<5	<5	<5	<5
Toluene, ug/kg	<b>&lt;</b> 5	<5	<5	<5	<b>&lt;</b> 5
Vinyl Acetate, ug/kg	<50	<50	<50	<50	<50
Vinyl Chloride, ug/kg	<5	<5	<5	<5	<5



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FAX: (818) 795-8579

LOG NO: P88-12-019

Received: 01 DEC 88 Reported: 09 DEC 88

Mark Miller Law Environmental 3420 N. San Fernando Rd., Suite 200 Burbank, CA 91504

	REPOR	T OF ANALY	TICAL RESU	LTS		Page 3
LOG NO	SAMPLE DESCRIPTION, S	OIL SAMPLE	:s		DA	TE SAMPLED
12-019-1 12-019-2 12-019-3 12-019-4 12-019-5	B-1 1' B-1 5' B-1 10' B-2 1' B-2 5'					O1 DEC 88 O1 DEC 88 O1 DEC 88 O1 DEC 88 O1 DEC 88
PARAMETER		12-019-1	12-019-2	12-019-3	12-019-4	12-019-5
trans-1,2-	ne Isomers, ug/kg Dichloroethylene, ug/k Dichloropropene, ug/kg		<50 <5 <5	<50 <5 <5	<50 <5 <5	<50 <5 <5



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Mark Miller Law Environmental 3420 N. San Fernando Rd., Suite 200 Burbank, CA 91504

Project: 58-8601

### REPORT OF ANALYTICAL RESULTS

Page 4

LOG NO SAMI	PLE DESCRIPTION, SO	IL SAMPLES		DA	TE SAMPLED
12-019-6 B-2 12-019-7 B-3 12-019-8 B-3 12-019-9 B-3	1' 5'	_			01 DEC 88 01 DEC 88 01 DEC 88 01 DEC 88
PARAMETER		12-019-6	12-019-7	12-019-8	12-019-9
1,1,2-Trichloro 1,1-Dichloroeth 1,1-Dichloroeth 1,2-Dichloroben 1,2-Dichloropro 1,3-Dichloroben cis-1,3-Dichloroben 1,4-Dichloroben	r, Times l  pethane, ug/kg hloroethane, ug/kg bethane, ug/kg hane, ug/kg hane, ug/kg hane, ug/kg hzene, ug/kg pane, ug/kg propropene, ug/kg hzene, ug/kg	12/06/88 1 <5 <5 <5 <5 <5 <5 <5 <5 <5 <5 <5 <5 <5	12/06/88 1 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	12/07/88 1 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	12/07/88 1 <5 <5 <5 <5 <5 <5 <5 <5 <5 <5 <5 <5 <5
Benzene, ug/kg		<5	<5	<5	<5





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Project: 58-8601

### REPORT OF ANALYTICAL RESULTS

Page 5

LOG NO SAMPLE DESCRIPTION, SOIL	SAMPLES		DA	TE SAMPLED
12-019-6 B-2 10' 12-019-7 B-3 1' 12-019-8 B-3 5' 12-019-9 B-3 10'				01 DEC 88 01 DEC 88 01 DEC 88 01 DEC 88
PARAMETER	12-019-6	12-019-7	12-019-8	12-019-9
Chlorobenzene, ug/kg Carbon Tetrachloride, ug/kg Chloroethane, ug/kg Bromoform, ug/kg Chloroform, ug/kg Chloromethane, ug/kg Carbon Disulfide, ug/kg Dibromochloromethane, ug/kg Ethylbenzene, ug/kg Freon 113, ug/kg Methyl Isobutyl Ketone, ug/kg Methyl Ethyl Ketone, ug/kg Methylene Chloride, ug/kg Tetrachloroethylene, ug/kg Styrene, ug/kg		্ ্ ্ ্ ্ ্ ্ ্ ্ ্ ্ ্ ্ ্	ঠ ঠ ঠ ঠ ঠ ঠ ঠ ঠ ঠ ঠ ঠ ঠ ঠ ঠ ঠ ঠ ঠ ঠ ঠ	
Trichloroethylene, ug/kg Trichlorofluoromethane, ug/kg Toluene, ug/kg	<5 <5 <5	<5 <5 <5	ර ර ර	<5 <5 <5
Vinyl Acetate, ug/kg Vinyl Chloride, ug/kg Total Xylene Isomers, ug/kg trans-1,2-Dichloroethylene, ug/kg	<50 <5 <50 <5	<50 <5 <50 <50	<50 <5 <50 <5	<50 <5 <50 <5



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Mark Miller Law Environmental 3420 N. San Fernando Rd., Suite 200 Burbank, CA 91504

Project: 58-8601

Page 6

# REPORT OF ANALYTICAL RESULTS

LOG NO	SAMPLE DESCRIPTION,	SOIL SAMPLES			DA	TE SAMPLED
12-019-6 12-019-7 12-019-8 12-019-9	B-2 10' B-3 1' B-3 5' B-3 10'			• • • • • • •		01 DEC 88 01 DEC 88 01 DEC 88 01 DEC 88
PARAMETER		12-019	6 1	2-019-7	12-019-8	12-019-9
trans-1,3	-Dichloropropene, ug/k	¢g	(5	<5	<5	<5



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Mark Miller Law Environmental 3420 N. San Fernando Rd., Suite 200 Burbank, CA 91504

	· REPORT OF ANALYTICAL RESUL	TS	Page 7
LOG NO	SAMPLE DESCRIPTION, SOIL SAMPLES		DATE SAMPLED
12-019-10	B-1 1' BC/QC SPK		01 DEC 88
PARAMETER		12-019-10	
Date Extra Dilution 1 1,1-Dichle Benzene, 1 Chlorobens Trichloro Toluene, 1	<pre>11. (EPA-8240) acted Factor, Times 1 oroethylene, Percent Percent zene, Percent ethylene, Percent</pre>	12/06/88 1 130 100 105 85 105	



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Law Environmental
3420 N. San Fernando Rd., Suite 200
Burbank, CA 91504

REPORT OF ANALYT	ICAL RESULTS	Page 8
LOG NO SAMPLE DESCRIPTION, SOIL SAMPLES		DATE SAMPLED
12-019-11 B-1 1' BC/QC DUP-SPK		01 DEC 88
PARAMETER	12-019-11	
Vol.Pri.Poll. (EPA-8240) Date Extracted Dilution Factor, Times 1 1,1-Dichloroethylene, Percent Benzene, Percent Chlorobenzene, Percent Trichloroethylene, Percent Toluene, Percent	12/06/88 1 130 110 110 90	
Other Vol.Pri.Poll. (EPA-8240)	<b>** ** **</b>	



### ANALYTICAL REPORT

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LOG NO: P88-12-019

Received: 01 DEC 88 Reported: 09 DEC 88

Mark Miller Law Environmental 3420 N. San Fernando Rd., Suite 200 Burbank, CA 91504

REPORT OF ANALYTICAL RESULTS	Page 9
LOG NO SAMPLE DESCRIPTION, NON-SALINE WATER SAMPLES	DATE SAMPLED
12-019-12 Laboratory Control Standard	
PARAMETER 12-	019-12
Vol.Pri.Poll. (EPA-8240)  Date Extracted  Dilution Factor, Times 1  1,1,1-Trichloroethane, Percent  1,1,2,2-Tetrachloroethane, Percent  1,1-Dichloroethane, Percent  1,1-Dichloroethane, Percent  1,2-Dichloroethane, Percent  1,2-Dichloroethane, Percent  1,2-Dichlorobenzene, Percent  1,3-Dichloropropane, Percent  1,3-Dichlorobenzene, Percent  2-Chloroethylvinylether, Percent  2-Hexanone, Percent  Acrolein, Percent  Acrolein, Percent  Bromodichloromethane, Percent  Bromodichloromethane, Percent  Bromomethane, Percent  Carbon Tetrachloride, Percent  Chloroethane, Percent  Carbon Tetrachloride, Percent  Chloroethane, Percent  Chloroethane, Percent  Chloroethane, Percent	1 95 75 110 95 90 95 100 80 100 90 105 85 69 71 95 160 90 100 90 90 90 90 90 90 90 90



### **ANALYTICAL REPORT**

373 SOUTH FAIR OAKS AVENUE, PASADENA, CA 91105 (818) 795-7553 (213) 681-4655

FAX: (818) 795-8579

LOG NO: P88-12-019

Received: 01 DEC 88 Reported: 09 DEC 88

Mark Miller Law Environmental 3420 N. San Fernando Rd., Suite 200 Burbank, CA 91504

	REPORT OF ANALY	TICAL RESULTS	Page 10
LOG NO	SAMPLE DESCRIPTION, NON-SALINE	WATER SAMPLES	DATE SAMPLED
12-019-12	Laboratory Control Standard	_	
PARAMETER		12-019-12	
Bromoform,		75 100	
Chlorometh	nane, Percent sulfide, Percent	80 80	
Dibromoch	loromethane, Percent ene, Percent	95 90	•
Freon 113,		85 95	
Methyl Eth	nyl Ketone, Percent Chloride, Percent	110 75	
	roethylene, Percent	85 90	
Trichloroe	ethylene, Percent fluoromethane, Percent	95 <b>65</b>	
Toluene, E		80 55	
Vinyl Chlo	oride, Percent ene Isomers, Percent	205 88	
trans-1,2-	-Dichloroethylene, Percent -Dichloropropene, Percent	80 80	



## ANALYTICAL REPORT

373 SOUTH FAIR OAKS AVENUE, PASADENA, CA 91105 (818) 795-7553 (213) 681-4655

FAX: (818) 795-8579

LOG NO: P88-12-019

Received: 01 DEC 88 Reported: 09 DEC 88

Mark Miller Law Environmental 3420 N. San Fernando Rd., Suite 200 Burbank, CA 91504

Project: 58-8601

### REPORT OF ANALYTICAL RESULTS

Page 11

LOG NO SAMPLE DESCRIPTION, BLANK V	TATER SAMPLES DATE SAMP
12-019-13 Reagent Blank	
PARAMETER	12-019-13
PARAMETER	
Vol.Pri.Poll. (EPA-8240)	
Date Extracted	12/06/88
Dilution Factor, Times 1	1
1,1,1-Trichloroethane, ug/L	<b>&lt;</b> 5
1,1,2,2-Tetrachloroethane, ug/L	<b>&lt;</b> 5
1,1,2-Trichloroethane, ug/L	<b>(</b> 5
1,1-Dichloroethane, ug/L	<b>(</b> 5
1,1-Dichloroethylene, ug/L	<b>&lt;</b> 5
1,2-Dichloroethane, ug/L	<5
1,2-Dichlorobenzene, ug/L	<5
1,2-Dichloropropane, ug/L	<5
1,3-Dichlorobenzene, ug/L	<b>&lt;</b> 5
cis-1,3-Dichloropropene, ug/L	<5
1,4-Dichlorobenzene, ug/L	<b>&lt;</b> 5
2-Chloroethylvinylether, ug/L	<b>45</b>
2-Hexanone, ug/L	<b>&lt;</b> 5
Acetone, ug/L	<50
Acrolein, ug/L	<50
Acrylonitrile, ug/L	<50
Bromodichloromethane, ug/L	<b>&lt;</b> 5
Bromomethane, ug/L	<b>&lt;</b> 5
Benzene, ug/L	<b>&lt;</b> 5
Chlorobenzene, ug/L	<b>45</b>
Carbon Tetrachloride, ug/L	<b>&lt;</b> 5
Chloroethane, ug/L	<b>&lt;</b> 5



ANALYTICAL REPORT

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Project: 58-8601

### REPORT OF ANALYTICAL RESULTS

Page 12

LOG NO	SAMPLE DESCRIPTION, E	BLANK WATER SAMPLES	DATE SAMPLED
12-019-13	Reagent Blank		
PARAMETER		12-019-13	
Dibromochlo Ethylbenzer Freon 113, Methyl Isol Methyl Ethy Methylene ( Tetrachloro Styrene, ug Trichloroe Trichlorof Toluene, ug Vinyl Aceta Vinyl Chlor Total Xyler trans-1,2-1	ug/L , ug/L ane, ug/L ulfide, ug/L promethane, ug/L ne, ug/L ug/L butyl Ketone, ug/L chloride, ug/L bethylene, ug/L thylene, ug/L thylene, ug/L luoromethane, ug/L g/L ate, ug/L	ত ত ত ত ত ত ত ত ত ত ত ত ত ত	

Jeffrey Af Erjon, Laboratory Manager

373 SOUTH FAIR OAKS AVENUE PASACENA, CA 91105 \* (818) 795-7553

January 3, 1989

Mr. Warren Gross Project: 58-8601 Law Environmental 3420 North San Fernando Road, Suite 200 Burbank, California 91504

Subject: Methylene Chloride Contamination in the Laboratory

Dear Mr. Gross:

As we discussed with the low-level 8240 analyses for Brown and Caldwell Laboratories log number P88-12-019, methylene chloride is a common laboratory contaminant used in several organic sample preparation, including Methods 625 and 608. Although we take special precautions to isolate the use of methylene chloride, we cannot eliminate this compound entirely from the laboratory atmosphere. The levels of methylene chloride vary, not only from day to day, but also from morning to evening, depending upon the type of sample preparation activity taking place in the laboratory. We typically see between 2 and 10 ug/L methylene chloride in our laboratory blanks.

We reported a blank value of 9 ug/L methylene chloride with your report. The sample values ranged from 6 to 16 ug/kg methylene chloride. This is laboratory contamination and this variance is within reason.

Should you have any questions, please do not hesitate to call us.

Very truly yours,

BROWN AND CALDWELL

Jane Freemyer/

Client Services Manager

JF:lah



LAW ENVIRONMENTAL, INC. 3420 N. San Fernando Blvd. suite 200 Burbank, California 91504 (518) 848-0214

# CHAIN OF CUSTODY RECORD

Lab Log Number <u>P88-12-019</u>

Client 1	iame	IN EN	URAN	MENTAL Project Number 58-	-8601		Analyses Required	,
Project	Name	ANKED	PAC	IFIC/				
Report A	ttention	JARRET	1 GRO	55 Sampled by MARK MILLER		43°44	3/////////	/
Sample Number	Date Sampled	Time Sampled	Type*	Sample Description	Number of Containers	/B//		Romarks
)	12/1/88		50	B-1@1'		1		ulava
1				B-105'		4		
3				B-1010'		1	5	TECTION LIMITS
4				8-201		141		
5				B-205		14	ING	HOE OA/QC
6				B-2010		141		CAMENTS
1			11_	8-301		14		
8			<b>↓</b> /	B-3@5'		141		
2	1		↓	B-3@10'		14		
			ļ					
			ļ					i
<u> </u>		<u> </u>			<u> </u>			

2) Brieffile	Company	Date	1.1 1000
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Received by A-Z. Turn	BCAC	12/1/88	73500
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NOTE: Samples are discarded 30 days after results are reported, unless other arrangements are made. Hazardous samples will be returned to client or disposed of at client expense.

2166-01089

<sup>\*</sup>AQ - Aqueous; NA - Nonequeous; SL - Studge; GW - Ground Water; SO - Soil; PE - Petroleum; OT - Other

Printed/Typed Name	Signature	Claus	Month Day Year
17. Transporter 1 Acknowledgement of Receipt of Materials  Printed / Typed Name    F	Signature	the T. King	Month Day Year
Printed/Typed Name	Signature		Month Day Year
19. Discrepancy Indication Space			

HP 000001

Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

INSTRUCTIONS ON THE BACK

DHS 8022 A (1/87) EPA 8700—22 (Rev. 9-86) Previous editions are obsolete.

YELLOW: GENERATOR RETAINS

INSTRUCTIONS ON THE BACK

Toxic Substances Control Division

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17. Transporter 1 Acknowledgement of Receipt of Materials		to to	
Printed/Typed Name  TONESCHALL CARREDA	Signature	)	Month Day Year
18. Transporter 2 Acknowledgement of Receipt of Materials		7,7-7,-	
Printed/Typed Name	Signature		Month Day Year
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19. Discrepancy Indication Space

HP 000003

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name Signature

DHS 8022 A (1/87)

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INSTRUCTIONS ON THE BACK

Month Day Year

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15. Special Handling Instructions and Additional Information Rubber Gleves + Safety Glasses. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. Month Day Printed/Typed Name Year 125Se 7 67 17. Transporter 1 Acknowledgement of Receipt of Materials RANSPORTE Printed/Typed Name CAREPCION Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name Month Day 19. Discrepancy Indication Space F A ı HP 000004 ī 20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this pranifest except as noted in Item 19. Ţ Printed/Typed Name Month Day Year ULLN 101311215 INSTRUCTIONS ON THE BACK EPA 8700-22

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Disposal Control Service 7. Transporter 2 Company Name	IC   A   T   O   8   O   O   3   8. US EPA ID Numbe			nsporter's te Transpo		714-9	83-0342
7. Iransporter 2 Company Name	8. US EPA ID NUMBE	, 		naporter's			
9. Designated Facility Name and Site Address	10. US EPA ID Number	r	G. Sta	te Facility	's ID		
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J. Additional Descriptions for Materials Listed Above			K. Ha	ndling Cod	es for W	astes Li   b.	sted Above
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15. Special Handling Instructions and Additional Information				<del></del>		<u></u>	
Wear appropriate personal prote	ective equipment.						
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national government regulations.	gram in place to reduce the volum	ne and toxicity	of was	te generat	ed to the	e degree	I have determin
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2166-01089 State of California Health and Welfare Agency Form Approved OMB No. 2050—0039 (Expires 9-30-88)

Please print or type. (Form designed for use on elite (12-pitch typewriter). Toxic Substances Control Division 1. Generator's US EPA ID No. **UNIFORM HAZARDOUS** Information in the shaded areas CATOOCIG4625 is not required by Federal law. WASTE MANIFEST 3. Generator's Name and Mailing Address
FLICIHT ACES

SEINICES A. State Manifest Document Number 11310 SHEKMIKA WAY, SUN VALLEY CA B. State Generator's ID 4. Generator's Phone (213 - 675 29 30 D. Transporter's Phone 21 E. State Transporter's ID F. Transporter's Phone 9. Designated Facility Name and Site Address US EPA ID Number G. State Facility's ID H. Facility's Phone SIGNAL HILL, CA CATO80011059 13. Total Quantity Unit 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) Waste No. Wt/Vo WASTE WATER FOIL 9 GENER EPA/Othe State A T EPA/Other 0 EPA/Other EPA/Other J. Additional Descriptions for Materials Listed Above K. Handling Codes for Wastes Listed Above d. 15. Special Handling Instructions and Additional Information KUBBEL GLOVES, SHFETY GLASSES. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. Printed/Typed Name Printed/Typed Name Signatore 15 18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name Signature 19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name

DHS 8022 A (1/87)

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YELLOW: GENERATOR RETAINS

INSTRUCTIONS ON THE BACK

HP 000006

Month Day Year

Signature

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17. Transporter 1 Acknowledgement of Receipt of Materials	7	
Printed/Typed Name	Signature And Charles	Month Day Year
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Printed/Typed Name	Signature	Month Day Year
19. Discrepancy Indication Space		

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20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name Signature

Month Day Year

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EPA 8700—22 (Rev. 9-86) Previous editions are obsolete.

YELLOW: GENERATOR RETAINS

INSTRUCTIONS ON THE BACK

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3. Generator's Name and Mailing Address	MCES		A. Sta	te Manifest D	ocument,Nuc	•
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9. Designated Facility Name and Site Address	10. US EPA ID Number		G. 518	ite Facility s II	ر 1 ( 1 )	
SIGNAL HILL CA	CATCACOL	159	H. Fac	cility's Phone	1 1 1	<u> </u>
11. US DOT Description (Including Proper Shipping Name,		12. Conta	iners	13. Total Quanti	ty Unit	I. Waste No.
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b.				<del>                                     </del>	-	State
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15. Special Handling Instructions and Additional Information	FETY GLASSE	5				
16.  GENERATOR'S CERTIFICATION: I hereby declare name and are classified, packed, marked, and lat international and national government regulations.  If I am a large quantity generator, I certify that I had determined to be economically practicable and the me which minimizes the present and future threat	beled, and are in all respects in prop- ave a program in place to reduce the at I have selected the practicable me to human health and the environment;	er condition  volume and  ethod of trea  OR, if I am	for trantoxicity transition to the transition to	of waste get storage, or o	hway accor nerated to t disposal cur nerator, I ha	ding to applicable  he degree I have rently available to ave made a good
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(1/87)	YELLOW: GENERATOR RETAINS			INCTRII	STICNE O	N THE BACK

Sacramento, California

(Form designed for use on elite (12-pitch typewriter).

EPA 8700—22 (Rev. 9-86) Previous editions are obsolete.

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EPA 8700—22 (Rev. 9-86) Previous editions are obsolete

Printed/Typed Name

YELLOW: GENERATOR RETAINS

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Signature

INSTRUCTIONS ON THE BACK

Month Day

Year

UNIFORM HAZARDOUS	ite (12-pitch typewriter).  1. Generator's US EPA ID	No.	Manifest	2. 1	Page 1	Informat	ion in e	he shaded area
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3. Generator's Name and Mailing Address			1 . 1 . 1 . 1 . 21 .		te Manite	st Docum	ent Num	pel
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4. Generator's Phone (21) 375	2730	<del></del>	<del></del>	Hi	Altic	શે ગુંદી	<u>0</u>	<u>4000</u> 4000
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J. Additional Descriptions for Materials List		ر ت ح		a.	_	. 1	b.	sted Above
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15. Special Handling Instructions and Additi	ional Information		<del></del>					
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18.  GENERATOR'S CERTIFICATION: 1 h name and are classified, packed, ma	arked, and labeled, and are							
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GENERATOR'S CERTIFICATION: It name and are classified, packed, minternational and national government of I am a large quantity generator. It determined to be economically practime which minimizes the present and faith effort to minimize my waste generator. The printed Typed Name  Fig. 17. Transporter 1 Acknowledgement of Rec Printed Typed Name  18. Transporter 2 Acknowledgement of Rec Printed Typed Name	arked, and labeled, and are regulations. Sertify that I have a program ticable and that I have sele future threat to human hea eration and select the best	in place to reduce the practical than the environment waste manageme  Signature  Signature	n proper conditions to the volume and ble method of trument; OR, if I and method that is	n for trand toxicity eatment, m a small available	of waste storage, I quantity to me a	e generate or dispo- y generate no that I c	accord ed to the sal curr or, I ha can affo	ing to applicable degree I have ently available to we made a good rd.  Month Day Y.  Month Day Y.  Month Day Y.
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INSTRUCTIONS ON THE BACK

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3. Generator's Name and Mailing Address FLIGHT ACCESSO		10/4/3/1/10/0	101710		e Manifest D		umber
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7. Transporter 2 Company Name	8.	US EPA ID Number		E. Stat	e Transporte	r's ID	
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EPA 8700-22 (Rev. 9-88) Previous editions are obsolete.

Toxic Substances Control Division

xýn Aş	California—Health and Welfare Agency pproved OMB No. 2050—0039 (Expires 9-30-88)	(A)				partment of rieath Service Substances Control Divisio Sacramento, Californi
<b>A</b>	UNIFORM HAZARDOUS  WASTE MANIFEST  Light of type. (Form designed for use on elite (12-pitch typewriter).  1. Generator's US EPA ID AMERICAN DICTOR OF THE CONTROL OF THE CO	Docu	nnifest ment No.	2. Page 1	1	in the shaded areas red by Federal law.
	3. Generator's Name and Mailing Address		41212		ifest Document	Number
	FLIGHT ACCESSORY SERVICE	1465 1465	CA	B. State Gen	16404	55
	4. Generator's Phone (Z13 875-2930	9125	<b>Z</b>		_	Coliforation
	5. Transporter 1 Company Name 6.	US EPA ID Number		C. State Trai	nsporter's ID	G10147
	7. Transporter 2 Company Name 8.	9983614	41312	D. Transporte	<del></del>	3-776-6233
			1 1	F. Transporte		
	Designated Facility Name and Site Address     10.	US EPA ID Number		G. State Fac	· ·	
	RHO-CHEM.CORP.	ALLE 90	301	H. Facility's		<u> ४५१५३</u> य
	425 ISTS AVE. INGLE WOOD C	00183164	4 3 Z	213-	776-6	233
	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and		No.	Туре	Quantity U	Init Waste No.
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ı	N.A. 1693		كال	DMI	1 4 4 7	5 F-001
	"WASTE FLAMABLE LIQUID					State 2.13
,	UN 1255		12	DM	165	G D-001
í	c.					State
	3		1 1			EPA/Other
	d.					State
						EPA/Other
	J. Additional Descriptions for Materials Listed Above 11.a. TK1 1.1.1 80% WATER 199	<u> </u>	<del>-</del>	メ Handling (	Codes for Waste	s Listed Above
	116 Petroleum Naphth 90 Toulene.		<u>.</u>		.	· · · · · · · · · · · · · · · · · · ·
	AFRON GLOVES, GOGGLES					
	16.  GENERATOR'S CERTIFICATION: I hereby declare that the contents name and are classified, packed, marked, and labeled, and are in international and national government regulations.					
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	18. Transporter Acknowledgement of Receipt of Materials	Jan 1 Cor				
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	19. Discrepancy Indication Space					
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	20. Facility Owner or Operator Certification of receipt of hazardous materials Printed/Typed Name	nature //	except at	prioted in item	19.	Month Day Year
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4	UNIFORM HAZARDOUS 1. Generator's U WASTE MANIFEST 1 ATO	IS EPA ID NO. 11016416215		anifest Iment No.	2. Page of	inform		the shaded areas by Federal law.
	3. Generator's Name and Mailing Address	RVICES	7.52.0	16.1 Q1	A. State Ma		nent Num	_
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	5. Transporter 1 Company Name	6. US EPA IC	9/3 Number	52	C. State Tra	191316 Insporter's I		301919
	KiNGEKING DRAIN OIL	KADALAL	4/2/3	131210	D. Transpor		2/3)	439-8500
	7. Transporter 2/Company Name	1		1 1 1	F. Transport	·		
	9. Designated Facility Name and Site Address	10. US EPA ID	Number	<del></del>	G. State Fa	-		
	PRI 1835 E. 29Th ST			•	H. Facility's		MY	1015191
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	11. US DOT Description (Including Proper Shipping Name, Haza	ard Class, and ID Number)	·	12. Conta	Type	3. Total Quantity	14. Unit Wt/Vol	Waste No.
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E R	b							State
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	J. Additional Descriptions for Materials Listed Above		```		K. Handling	Codes for V	/astes Lis	sted Above
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	WASTEDIL & WATER				с. 		đ.	
	15. Special Handling Instructions and Additional Information	_						
	RUBBER GLOVES, S	AFETY GL	ASSI	ES_	<del></del>	-		
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Ī	20. Feeliny Owner or Operator Certification of receipt of hazard	ous materials covered by	this manifes	t except as	noted in Item	19.		HP 000015
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•	UNIFORM HAZARDOUS 1. Generator's US EPA ID	Doo	fanifest ument No.	ł	~		he shaded areas			
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	3. /senerator's Name and Mailing Address			A. Sta	te Manifest Docur					
	Plight Accessory Services			B. Sta	te Generator's ID	DC	44			
	11310 Sherman Way, Sun Valley, CA 4. Generator's Phone (818) 765-6261	91352		l .	AMORI	منما	lalalelel			
	5. Transporter 1 Company Name 6.	US EPA ID Number		C. Sta	te Transporter's II		2 4 8			
	Disposal Control	riolsiololali	خاهادا		naporter'a Phone	_000	-00b-33b5			
	7. Transporter 2 Company Name 8.	US EPA ID Number			te Transporter's il	,				
	9. Designated Facility Name and Site Address 10	US EPA ID Number		<b>↓</b> _	te Facility's ID					
	Kettleman Hills Facility			ľ	HITODIO	12412	1/1/171 1			
•	35251 Skyline Rd.			H. Fac	ility's Phone	17.15				
	Kettleman Hill City, CA  C A	F006461		1.5		<u>- 17</u>				
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	J. Additional Descriptions for Materials Listed Above	/	114	DIM	ading Codes for V	17	D006/1847			
	A) See Profile E-65266  B) See Profile J-15003  C) See Profile J-15004  D) See Profile J-15002			C.		d.				
	15. Special Handling Instructions and Additional Information	<del>//</del>	<del></del>		<del>,</del>	<u> </u>	<del></del>			
	Gloves, Goggles									
	GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.									
	hational government regulations.	•					I have determine			
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# Instructions on the Back

Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS  WASTE MANIFEST  3. Generator's Name and Mailing Address	Doo	lanifest ument No.	2. Page 1	1-4		
3. Generator's Name and Mailing Address	·   レ   ー   レ   /   9  0		1 of -	1		ne shaded areas by Federal law.
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5 Transporter 1 Company Name 6	US EPA ID Number		C. State Transp	orter's its	1070	2) 0) 6) 6) 소조
Disposal Control ( COUNCE  CA	P10[8:0 0 3 4	11814	D. Transporter	s Phone	1-606	-824-3345
7. Transporter 2 Company Name 8.	US EPA ID Number		E. State Transp F. Transporter			
Designated Facility Name and Site Address     10.	US EPA ID Number	111	G. State Facilit			
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Casmalia, CA 93429		12. Cont	ainers 13. T	otal	14.	l.
11. US DOT Description (Including Proper Shipping Name, Hazard Class,	and ID Number)	No.	. Туре	uantity	Unit Wt/Vol	Waste No.
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b. Hasardous Waste Solid R.Q.	· · · · · · · · · · · · · · · · · · ·			1	1	State 181
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DHS 8022 A (1/88) EPA 8700—22 (Rev. 9-86) Previous editions are obsolete.

CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-862-7550

SPEL.

CASE OF AN EMERGENCY OR

Do Not Write Below This Line

YELLOW: GENERATOR RETAINS

UNIFORM HAZARDOUS	1. Generator's US EPA ID	No. M	Aanifest :ument No.	2. Pa	( mom		he shaded area
WASTE MANIFEST	1214101 1010161	4/4/5/ 1///	1-1:10	/ 01			by Federal law
3. Generator's Name and Mailing Address				A. State	Manifest Document 8897	Tight Num	ber
4. Generator's Phone ( '1') 7 '		37		B. State	Generator's fD		
Generator's Phone ( ' ) /      Transporter 1 Company Name	6.	US EPA ID Number		C State	Transporter's I	<u> </u>	
- (1) //			1 1-1		porter's Phone		1 1/2 CA
7. Transporter 2 Company Name	8.	US EPA ID Number	<del></del>	E. State	Transporter's H		<u></u>
	1_1_1	11111		F. Trans	porter's Phone		
Designated Facility Name and Site Address     T		US EPA ID Number		G. State	Facility's ID		
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18. Transporter 2 Acknowledgement of Rec	eipt of Materials						
Printed/Typed Name		Signature					Month Day
19. Discrepancy Indication Space		<del></del>			<del></del>		<del></del>
20. Facility Owner or Operator Certification	of receipt of hazardous mate	rials covered by this mar	nifest excep	t as noted	in Item 19	·	<del> </del>
20. Facility Owner or Operator Certification Printed/Typed Name	of receipt of hazardous mate	rials covered by this man	nifest excep	t as noted	in Item 19.	·	Month Day
	of receipt of hazardous mate		nifest excep	t as noted	in Item 19.		Month Day

Do Not Write Below This Line

YELLOW: GENERATOR RETAINS

Printed/Typed Name DHS 8022 A (1/88) Do Not Write Delow This Lin EPA 8700-22 (Rev. 9-86) Previous editions are obsolete.

Yellow: TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

WASTE MANIFEST	CAP10010	646131517	Document No.	/ of	/ is not re	_ :	by Federal la		
3. Generator's Name and Mailing Address Flank Are 6 5 y Se 11376 Shrijiya WAy	ruicus.			A. State	Meumest Docue	CO 1	2		
4. Generator's Phone (PIS ) 76-77 F	769 6701			B. State Generator's ID  H   A   H   G   3   G   C   2   2   D   G   G					
				C. State Transporter's ID 54200 D. Transporter's Phone 3443743					
7. Transporter 2 Company Name	8.	US EPA ID Nur	nber	E. State Transporter's ID					
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9. Designated Facility Name and Site Addre	<b>33</b> 10.	US EPA ID Nur	nber	G. State	Facility's ID				
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STEPPE PILL . CAL.	<u> </u>	P/ 5801					6597		
11. US DOT Description (Including Proper St	nipping Name, Hazard Cl	ass, and ID Number)	12. Conta	Type	13. Total Quantity	14. Unit Wt/Vo	Waste N		
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YELLOW: GENERATOR RETAINS

INSTRUCTIONS ON THE BACK

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3. Generator's Name and Mailing Addr		Accessory Serv			A. Sta	te Manif	est Doc	ment N	umber
	_	herman Way				87	755	381	71
	the second secon	ley, CA 91352	2		B. Sta	te Gene	rator's I	)	
4. Generator's Phone (818) 765-	6201				Ħ	ALH	0 4 6	Slola	121016161
5. Transporter 1 Company Name		6. US EF	PA ID Number						07057/910
Disposal Control Se	r	1 C A T 0 8	10101314	1 1 8 4	D. Tra		's Phone		10-824-33h
7. Transporter 2 Company Name		8. US EF	PA ID Number				porter's		
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11. US DOT Description (Including Pro	per Shipping Name, I	Hazard Class, and ID Num	nber)	No.	Туре		Quantity	Uni Wt/V	t Waste No
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WASTE MANIFEST  3. Generator's Name and Mailing Address	0 0 6 4 6 2 5 7 4	1454	A. Sta	te Mani	fest Docur		
Flight Accessory Services				3	755		70
11310 Sherman Way, Sun Valley,	CA 91352		B. Sta	te Gene	erator's ID	201	<u> </u>
4. Generator's Phone ( 888) 765-6201	GR 71332					1-1-1	املماما
5. Transporter 1 Company Name	6. US EPA ID Number				Q  3  6 sporter's l		2101616
					r's Phone		1021
Dispose 1 Control Set. 7. Transporter 2 Company Name	1C   A   T   O   8   O   O   B   A   8. US EPA ID Number	111814		<u> </u>	sporter's li	1_8	100-824-
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Kettleman Hills Facility			H. Fac	cility's F	hone	I DIGI	PILLI
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Kettleman Hill City, CA	II A I I I I I I I I I I I I I I I I I	12. Conta		13.	Total	14.	1.
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EPA 8700—22 (Rev. 9-86) Previous editions are obsolete.

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	Printed/Typed Name	Signature / / /	Month Day Year						
	ERIK JOHNSON	Signature .	1/14/19/213						
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	Printed/Typed Name	Signature	Month Day Year						
	Trans Co Side Sr	and the second s	1/1/1/1/1						
	18. Transporter 2 Acknowledgement of Receipt of Materials								
	Printed/Typed Name	Signature	Month Day Year						
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	19. Discrepancy Indication Space								
	·		HP 000023						
	20. Facility Owner or Operator Certification of receipt of hazardou	is materials covered by this manifest except as noted in Item 19.							

DHS 8022 A (1/87)

ANSPORTER

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EPA 8700—22 (Rev. 9-86) Previous editions are obsolete.

Printed/Typed Name

YELLOW: GENERATOR RETAINS

INSTRUCTIONS ON THE BACK

Month Day

Year

Signature

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	or type. (Form designed for use on e		1088	9	D Toxic	Substa	ent of Health Services Inces Control Division Secramento, California		
	UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's US EPAID No.	Manifest Document No.	2. Pag	is not	ition in requi	the shaded areas red by Federal		
	3. Generator's Name and Mailing Address  4. Generator's Phone ( 1976 ) 3.25	Kyng80 Vin C / 1- 1/12∑10		A. Sta	18W. te Manifest Doct \$65079 te Generator's ID CC 6 6 46	87			
	5. Transporter 1 Company Name	6. US EPAID		<u> </u>	te Transporter's		U200		
	7. Transporter 2 Company Name	8. USEPAID	Number	D. Transporter's Phone 13-431-776 to  E. State Transporter's ID					
	O Books and E-199		لللل	nsporter's Phone	allibria ID				
	9. Designated Facility Name and Site Address	T,		G. State Facility's ID COUNTY (FACILITY'S Phone 213-595-4597					
	11/12/ 4/11 62		12. Cont	olnere I	13.		15-6547		
	11. US DOT Description (Including Proper Ship)		No.	Type	Total Quantity	Unit Wt/Vol	l. Waste No.		
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	J. Additional Descriptions for Materials Listed	I Above		K. Han	dling Codes for t	Vastes	Listed Above		
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۲	20. Facility Owner or Operator: Certification o	160.70	<del></del>			19.	Month Day Year		
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UNIFORM HAZARDOUS

WASTE MANIFEST

Generator's Name and Mailing Address FRIGHT ASSESSION SECTION

se print or type. (Form designed for use on elite (12-pitch) typewriter.)

Information in the shaded areas is not required by Federal

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B. State Generator's ID

Manifest

2. Page 1

of

1. Generator's US EPA ID No.

ALL IN PARTY IN THE INTERIOR NO.

DHS 8022 A (11/85) (EPA 8700-22)

19. Discrepancy Indication Space

Printed/Typed Name

YELLOW GENERATOR RETAINS

Signature

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Month Day Year

A	UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID No.  C   AD	Manif Dozume		2. Pa	ge 1		not		the shar	
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DHS 8022 A (11/85) (EPA 8700-22)

YELLOW GENERATOR RETAINS

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DHS 8022 A (11/85) (EPA 8700—22) YELLOW GENERATOR RETAINS

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		CM 10101010161416121517		_	ate Manifest Doc	ument /	Number 1
	3. Generator's Name and Mailing Address FLIGHT ACCESSORY SCRVIC	, <b>ও</b>		<b>E</b>	<b>B</b> 61329	<del>3</del> 75	·
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	4. Generator's Phone (2/3) \$75-26  5. Transporter 1 Company Name		ID Number		D 00 0 446 ate Transporter's		7 70 70 70
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OR	18. Transporter 2 Acknowledgement of Receipt	<del></del>		<del></del>			
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1	20. Facility Owner or Operator: Certification of		his manifest		cated in Ite	- 10	
¥	20. Facility Owner or Operator: Certification of Printed/Typed Name	Signature	Dy this meaning.	ехсер.	as noted in item		Month Day Year
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WASTE MANIFEST

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	3. Generator's Name and Mailing Address FLIGHT ACCESSORY SERVICES 11210 SHERMAN WAY					<u> 36</u>	132	969	Number :
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	4. Generator's Phone ( 2 \( \mathreal{y} \) 3 ) \$75 2930	US EPA ID N	lumber				18142		
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	WASTE OIL & WATER					R.C	21.	<del></del>	
	15. Special Handling Instructions and Additional information  RUBBER GLOVES - SAFETY GLASSES								
	16. GENERATOR'S CERTIFICATION: I hereby declare that the content proper shipping name and are classified, packed, marked, and is according to applicable international and national government re Unless I am a small quantity generator who has been exem-	abeled, and are in all resp egulations. pted by statute or regula	ects in pro ation from	oper co	onditio	on for o mak	transport e a waste	by highw	tation certification
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	UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's US EP		Manifest Document No				the shaged by Federa			
ŀ	3. Generator's Name and Mailing Address	C A DIOI OLO	161416121517	<del>-1-1-1-1</del>	A. St	ate Manifest Docum	ent Num	ber			
- [	Flight Accessory Servi	ic <b>e</b> s				- 87i8	355	24			
- 1	11316 Sherman Way				B. St	ate Generator's ID					
	4. Sergentifa Pfloogy, CA.	(213) 87		·-		املململما	حليا	اءاداء			
ł	5. Transporter 1 Company Name	<b>6</b> .	US EPA ID N	-	12.	ate Transporter's IL	<del>y                                    </del>				
ŀ	Chem-Pan Pumping Correl 7. Transporter 2 Company Name	ices, Inc. Cl	A 10 1 01 81 C1 7	<u>  2        4   2  </u> umber	E SU	ensporter's Phone	<del>213-</del> 2	<del>91-95</del> 0			
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ŀ	9. Designated Facility Name and Site Addres		US EPA ID N	umber		ate Facility's ID					
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ļ	J. Additional Descriptions for Materials Liste					ndling Codes for W	L	<u></u>			
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	16. GENERATOR'S CERTIFICATION: I he name and are classified, packed, mainternational and national government.	irked, and labeled, and									
- 1	international and national government regulations.  If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.										
	determined to be economically practi- me which minimizes the present and	icable and that I have to future threat to human	selected the practica health and the enviro	ble method of tr nment; OR, if I a	eatment, m a sma	storage, or dispo Il quantity genera	ed to the sal curr	ne degree ( ently availa ve made a			
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	UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID	No.  6   4   6   2   5   7	Manifest current No.	2. Page of	informa		shaded areas Federal law.
	3. Generator's Name and Mailing Address Flight Accessory Ser 11310 Sherman Way 4. Generator's Phone	213-875-2930	US EPA ID Number		B. State G	lanifest Docume 8 1 1 8 ienerator's ID	3554 	3
	5. Transporter 1 Company Name Chem-Ran Pumping Ser 7. Transporter 2 Company Name	vices In CAT		5 1 1	D. Transp	ransporter's ID	<u>-291-</u>	
		=	US EPA ID Number		F. Transpo	orter's Phone		
	9 Designated Facility Name and Site Addres CASMELLS RESpurces I	nc	US EFA ID NUIIDGI		ـ . ـ ا	acility's ID	7 K	8 1 2 5
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	11. US DOT Description (Including Proper Sh	ipping Name, Hazard Class,	and ID Number)	No.	Туре	Quantity	14. Unit Wt/Vol	Waste No.
	a. HAZARDOUS WASTE SOLI	D, N.O.S., O	RM-E, NA918	OD 16	DH O	1000		181 0000
	<b>b</b> .							PA/Other
	C.							PA/Other
	d.							PA/Other
	J. Additional Descriptions for Materials Liste Nickel Chloride 2 Absorbant 7	d Above			K. Handlin a. 03	g Codes for W	astes Liste b.	ed Above
	Appoinant /	<i>,</i>			C.		d.	
ı	15. Special Handling Instructions and Addition	nal Information						
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	16. GENERATOR'S CERTIFICATION: I he name and are classified, packed, mar international and national government r	ked, and labeled, and are						
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	17. Transporter 1 Acknowledgement of Receivered/Typed Name Joe Davidson	pt of Materials	Signature // 100	J:		Son	Мо	onth Day Year
	18. Transporter 2 Acknowledgement of Recei	pt of Materials	700	<b>X</b> _U		Solor		111111111
	Printed/Typed Name		Signature				<b>м</b> о	nth Day Year
	19. Discrepancy Indication Space							
	20. Facility Owner or Operator Certification o	f receipt of hazardous mater	<del> </del>	est except as	s noted in Ite	em 19.		0.00
	Printed/Typed Name		Signature				Mo.	nth Day Year

DHS 8022 A (1/87)
EPA 8700—22
(Rev. 9-86) Previous editions are obsolete.

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1.800-424-8802; WITHIN CALIFORNIA CALL 1.800-852-7550

YELLOW: GENERATOR RETAINS

INSTRUCTIONS ON THE BACK

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	4. Generator's Phone ( )	<u> - , , , , , , , , , , , , , , , , , , </u>				20064		
11	5. Transporter 1 Company Name	6.	US EPA IC		C. State Tra			
┝	7. Transporter 2 Company Name	- <u>  .   .  </u>	US EPA IC	Number	E. State Tra			- 434- Scc
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-	9. Designated Facility Name and Site Ad	dress 10.	US EPA IC	Number .	G. State Fac			
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9. Designated Facility Name and Site Address	10.	US EPA ID Num	ber	<u> </u>	orter's Phone		· · · · · · · · · · · · · · · · · · ·
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Signal House Co	1 1 1 1	1111	1 1 1	H. Facility	's Phone 75-65	-6-1	
11. US DOT Description (Including Proper Ship)	oing Name, Hazerd Class, and	ID Number)	12. Cont		13. Total Quantity	14. Unit Wt/Vol	Waste No.
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J. Additional Descriptions for Materials Listed	Above	·	<u> </u>	K. Handiin	g Codes for	Wastes	Listed Above
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15. Special Handling Instructions and Additions							
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16. GENERATOR'S CERTIFICATION: I hereby dec proper shipping name and are classified, pa according to applicable international and na	icked, marked, and labeled, an	d are in all respects	lly and accu	rately descondition fo	ribed above or transport b	by y highw	ay
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$I_1$	3. Generator's Name and Mailing Address FLIGHT ACCESSORY SERVICES				Manifest D	ocument	Number
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	4. Generator's Phone ( 213 ) 875-2930	,1332			D98142331	_	
	5. Transporter 1 Company Name	6. US EPA ID Numb	oer	<del></del>	Transporter		4200
	KING & KING DRAIN OIL	. CAD981423320	<u> </u>				-439-8500
	7. Transporter 2 Company Name	8. US EPA ID Numb	ber		Transporter		
	9. Designated Facility Name and Site Address	10. US EPA ID Numb	ner .		eporteda, Pho Becully's IC		4,43
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	15. Special Halloting Instructions and Additional Infor	mation					
	RUBBER GLOVES - SAFETY GLASSES						
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	for transport by highway according to applicable into	ernational and national govern	mental	égulatio	oner,	٢	Date
	Printed/Typed Name	Signature	<u> </u>		10 / 1/1	100 M	onth Day Year
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1	3. Generator's Name and Mailling Address	155			ate Manifest Poct 361329		lumber
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Н	7. Transporter 2 Company Name 8.	10196141-1		D. Tre	insporter's Phone		
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	}	11310 SHERMAN WAY, SUN V	ALLEY CA 91	352			e Generator's	ID	" " " " " " " " " " " " " " " " " " "		<b>1</b>
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$\  \ $	9.	Designated Facility Name and Site	Address	10. US EPA ID	Number		e Facility's iC		4 4	د نه شورون	
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ť		Item 19.								Date	
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Department of Health Services alifornia -- Health and Welfare Agency Toxic Substances Control Division Sacramento, California rlease print or type. (Form designed for use on elite (12-pitch) typewriter.) Manifest **UNIFORM HAZARDOUS** 1. Generator's US EPA ID No. Information in the shaded areas 2. Page 1 Document No. is not required by Federal **WASTE MANIFEST** CAD000646257 -Generator's Name and Mailing Address A.State Manifest Document Number FLIGHT ACCESSORY SERVICES 84610021 11310 SHERMAN WAY, SUN VALLEY CA 91352 B.State Garierator's ID 4. Generator's Phone ( 213 ) 875-2930 Catate Lansporter & ID US EPA ID Number Transporter 1 Company Name KING & KING DRAIN OIL D.Transporter's Phone CAD981423320 · E.State Transporter a II 7. Transporter 2 Company Name 8. US EPA ID Number Filestactatera Phone 9. Designated Facility Name and Site Address US EPA ID Number GState Pacifity's ID P.R.I. 1835 E. 29th. STREET The second SICNAL HILL CA. CAT080011059 12.Containers 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) Total Type a E WASTER OIL & WATER NOS NA 1270 001 TŢ E b. 0 C. scriptions for Materials List 15. Special Handling Instructions and Additional Information RUBBER CLOVES - SAPETY CLASSES 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations. Date Signature Month Day Year Printed/Typed Name 9 110 B7. S. LA SALLE 17. Transporter 1 Acknowledgement of Receipt of Materials Date TRANSPORTER Printed/Typed Name Signature Month Day Year 18. Transporter 2 Acknowledgement of Receipt of Materials Date

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Signature

Month Day Year

Approved OME se print or type.	3 No. 2050	-008th (Expire	s 9-30-88)	-pitch typewi	riter).								Subst	tances Control Di Sacramento, Cali	
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YELLOW: GENERATOR RETAINS

INSTRUCTIONS ON THE BACK

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EPA 8700—22 (Rev. 9-86) Previous editions are obsolete.

YELLOW: GENERATOR RETAINS

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4	UNIFORM HAZARDOUS WASTE MANIFEST  Generator's US ERA ID OOOOOOO	46257 Doc	lanifest ument No.		of I.	ation in the shaded areas required by Federal law.				
	3. Generator a Name and Mailing Address	ICES		A. Sta	ate Manifest Docur					
+	- 1/2/0 SHERMAN WAY &	SUN VALLE	Y C#	B, St	ate Generator's ID	J44J				
					ANCOC	646257				
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	CA.	T,08,001,1	0,59	H. Facility's Phone						
			12. Conta	iners	13. Total Quantity	14. I. Unit Waste No.				
11	11. US DOT Description (Including Proper Shipping Name, Hazard Class,	and ID Number)	No.	Type	Coantity	Wt/Vol				
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11	J. Additional Descriptions for Materials Listed Above			K. Ha	ndling Codes for W	/astes Listed Above				
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EPA 8700—22 (Rev. 9-88) Previous editions are obsolete.

YELLOW: GENERATOR RETAINS

INSTRUCTIONS ON THE BACK

DHS 8022 A (1/87) EPA 8700—22 (Rev. 9-86) Previous editions are obsolete.

INSTRUCTIONS ON THE BACK

Department of Health Services

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Yellow: GENERATOR RETAINS

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	4. Generator's Phone ( 2/3) = 7	5-299	0		_	70006	_	257		
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	3. Generator's Name and Mailing Address			84	55053	10	Number
	4. Generator's Phone ( )	9			te Generator's		6257
	5. Transporter 1 Company Name	6. US EPA ID Numb	er		te Transporter		·
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	15. Special Handling Instructions and Additional Informa		070			· · · · ·	
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	18. GENERATOR'S CERTIFICATION: I hereby declare that above by proper shipping name and are classified, packed transport by highway according to applicable internations	, marked, and labeled, and <b>are</b>	in all resp	ects in	ccurately desc proper condition	ribed on for	
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	Printed/Typed Name  3020 OCHCH	Signature (	Och	رور			Nonth Day Year
) I	18. Transporter 2 Acknowledgement or Receipt of Mate	rials					Date
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	19. Discrepancy Indication Space			-			
	20. Facility Owner or Operator: Certification of receipt of hitem 19.	azardous materials covered	by this m	anifest	except as not	ed in	Date
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	3. Generator's Name and Mailin	ng Address		<u> </u>	A State M	1.5	ument Number
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	4. Generator's Phone ( ) 5. Transporter 1 Company Nam			ID Number		ansporter's	10 12 136
	7. Transporter 2 Company Nam		9 JIS EPA	10 Number	D.Transpor	ter's Phone	71776-1233
			<u> </u>	· · · · ·	F. Transpor	ter's Phone	
	9. Designated Facility Name and	d Site Address	10. US EPA	ID Number	G.State Fa	•	14422
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<i>//</i>	15. Special Handling Instructions				K. Handling	Codes for	Wastes Listed Above
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	16. GENERATOR'S CERTIFICATI above by proper shipping name a transport by highway according	ind are classified, packe	d, marked, and labeled	, and <b>are</b> in all resp	ects in prope	etely describ er condition	ed for Date
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4117	20. Facility Owner or Operator: Cellitem 19.	rtification of receipt of	hazardous materials	covered by this m	anifest exce	pt as noted	in Date
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	4. Generator's Phone	to gara			;				
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	7. Transporter 2 Company Name	<u></u>	4 70 200 341	.c <sub>y</sub> .	D.Trai	nsporter's Pho	18/7/	41493	-C34
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	11. US DOT Description (Including Proper S			12.Conte	iners	13.	14.	<del>/ Z</del>	
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1	transport by highway according to applica	sble international and	national governmental :	regulation	<b>8.</b>		ſ	Date	
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1	7. Transporter 2 Company Name	8. US EPA ID Numb	er		Transporter			<u> </u>
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G	11. US DOT Description (Including Proper Shipping Name)		12.Conti	Type	13. Total Quantity	14. Unit Wt/Vol	STREET, STREET	lo.
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	15. Special Handling Instructions and Additional Inform		- 7 <sub>4</sub>	76				
	16. GENERATOR'S CERTIFICATION: I hereby declare the above by proper shipping name and are classified, packet transport by highway according to applicable internation	et the contents of this consignment, marked, and labeled, and are	ent are ful in all resp	ly and acc			Date	
	Printed/Typed Name	Signature	7.7	1			Month Day	
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Ţ	20. Facility Owner or Operator: Certification of receipt of Item 19.	hazardous materials covered t	y this ma	enifest ex	cept as note	ndin f		
	Printed/Typed Name	Signature		·		<u>_</u>	Date Month Day	Year

Please print or type. (Form designed for use on UNIFORM HAZARDOUS	elite (12-pitch) typewriter.)  1. Generator's US EPA ID No	- ~ Manifest	2. Page 1	Information	in the shaded areas
WASTE MANIFEST	1. 1.0000000	Document No.	of	law.	uired by Federal
3. Generator's Name and Mailing, A	indy		B.State Go	nerator's ID	ment Number 46257
5. Transporter 1 Company Name	6. +US EF	A ID Number			561412
Liquid Wests					783-034 2
7. Transporter 2 Company Name	8. US EF	A ID Number	3	nsporter's II	
9. Designated Facility Name and Si	ite Address 10. US EP	A ID Number	G.State Fa	er's Phone	<del></del>
9. Designated Facility Name and Si				Phone	
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11. US DOT Description (Including Prop		D Numberi No.	ı l '	Total U	nit Waste No.
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transport by highway according to a	are classified, packed, marked, and label pplicable international and national gov	ed, and are in all resp ernmental regulation	ects in prope s.	r condition fo	
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18. Transporter 2 Acknowledgement	····			····	Date Vac
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3. Generator's Name and Mailing Address FLIGHT ACCESSORY SERVICES	06 46257			1054 5054	Gument	Number
11310 Sherman Way , Sun Valle 4. Generator's Phone (213 ) 875-2930	y CA 91352	-		enerator's 006461		-
5. Transporter 1 Company Name	6. US EPA ID No.		C.State T	ransporter	10 3	7.036 3) 776-62
7. Transporter 2 Company Name	8. US EPA ID No		E. State T	ransporter's	i ID	<i>.</i>
Rho Chem Corp.	10. US EPA ID No	ımber	G.State F	ecility's ID 3644		
425 Isis Ave Inglewood, CA 90301	C.AD.0.08.3.6	.44.32	H.Facility's		233	•
11. US DOT Description (Including Proper Shipping Name, H	lazard Class, and ID Num	ber) 12.Conte	1	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
Waste ORM-A Liquid NA 1693		2	Drums M	108	Ga I	211
Waste NOS Flamable Liquid UN 1	993	20	Drums M	108	Gel	214
C.						
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Additional Compressions for Materials Listed Above 1-2 List Friendler others 2 Single List Fined Taber 2 Single List Fined Taber 3 Single List Fined Taber 4 Single List Fined Taber 4 Single List Fined Taber 5 Single List Fined Taber 5 Single List Fined Taber 5 Single List Fined Taber	601 201 701 201		K. Hendlin		Wastes	Listed Above
15. Special Handling Instructions and Additional Information Gloves and Goggles to be worn to the second se	then handling he contents of this consignarked, and labeled, and	nment ere full are in all resp	y and accur	ately descri	bed for	Date
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18. Transporter 2 Acknowledgement or Receipt of Materi	ials	pu	<u> </u>	<u>ر سه</u>	}	Date
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	4. Generator's Phone (2/7) 875 - 277 (5. Transponer 1 Company Name 6.	,		( a)	DOONE	162	57
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	7. Fransporter 2 Company Name 8.	US EPA ID Numb	er /		Transporter's	)	48303
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	9. Designated Facility Name and Site Address 10.	. US EPA ID Numb	er	G.Stati	Facility's ID		
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	11. US DOT Description (Including Proper Shipping Name, Haz	· i	No.	Туре	Total Quantity	Unit Wt∕Val	Wasta No.
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	Additional Constitutions for Materials Listed Above		To Silver	KHan	dling Codes for	Waste	s Listed Above
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	15. Special Handling Instructions and Additional Information	n ·					
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	16. GENERATOR'S CERTIFICATION: I hereby declare that the	contents of this consignme	nt are full	y and ac	curately descri	bed	
	above by proper shipping name and are classified, packed, ma transport by highway according to applicable international at	arked, and labeled, and <b>are</b> in the state of the state o	in all respondence	ects in p 8.	roper condition	for	
	Printed/Typed Name	Signature 4		<del></del>			Date Month Day Year
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-	Printed/Typed Name  KEN HUDSON	Signature	[ ] [ ]			Í	Month Day Year
PORT	18. Transporter 2 Acknowledgement or Receipt of Material	8					Date
TER	Printed/Typed Name	Signature				i	Month Day Year
	19. Discrepancy Indication Space	<u></u>		<del></del>			<u> </u>
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F40-1-F7	20. Facility Owner or Operator: Certification of receipt of haza item 19.	ordous materials covered b	y this ma	nifest (	except as noted	in t	
*	Printed/Typed Name	Signature		<del>-</del>	· · · · · · · · · · · · · · · · · · ·	لــــــا	Date Month Day Year
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٦	11.05 DOT Description (including Proper 3	onipping Name, mazaro	Class, and ID Number)	No.	Туре	Total Quantity	Unit Wt/Val	Wast	e No.
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+	20. Facility Owner or Operator: Certification Item 19.	n of receipt of hazardo	us materials covered b	y this ma	nifest e	xcept as not	ed in		
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1	UNIFORM HAZARDOUS J. Generator a USE	298257	Manifest Document No.	2. Page 1 of			ne shaded are ed by Fede	
П	3. Ganerator's Name and Mailing Address / Service	2 < 3	L	A State	Manifes P	ocumen	Number	*
	115To sherman way	•		8.State	Generator's	10	2 5 7	o .
	4. Generator's Phone (213) 873-2930			,				
	5. Transponer 1 Company Name 6.	97 & C C 3	Nymber 4		Transporter		9 3 - 03	117
	7. Transporter 2 Company Name 8.	US EPA ID	· · · ·		Transporter	14	3-63	
					orter's Pho		<del>,</del>	
	9. Designated Facility Name and Site Address C 10.	US EPA ID	Number	G.State	Facility's ID		<u>(</u> ;	
	CASMOTIO CAL.	4 50207	45125	H.Facilin	737-d	744	79	
	11. US DOT Description (Including Proper Shipping Name, Hazard	d Class, and ID Nu	mber) 12.Conta	iners	13. Total	14. Unit		
G	a. HAZJEGOUS WASEE NIPSI		No.	Туре	Quantity	as 1	Waste N	o.:
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T	<b>b.</b>							3.
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	<b>c</b> .						41.63	
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	d.		·					
	Additional Concessions for Materials Listed Above		1070	K.Hendii	ng Codes to	r vvaste:	Listed Abov	
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	15. Special Handling Instructions and Additional Information						•	
	Gloves							
	·							
	16. GENERATOR'S CERTIFICATION: I hereby declare that the co	entents of this cons	ianment are full	v and accu	rately descr	ibed		
	above by proper shipping name and are classified, packed, mark transport by highway according to applicable international and	ked, and labeled, ar	nd <b>are</b> in <b>all</b> resp	ects in pro	per conditio	n for		
		The contract of the contract o					Date	
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Ţ	17. Transporter 1 Acknowledgement of Registr of Materials				/		Date	
A	Printed/Typed Name	Signature	شتهد	··· -	<u> </u>	-	Month Day	
ļ	-INMES LAWKENCE		- Carrie				0 - )   / · Z Date	180
R	18. Transporter 2 Acknowledgement or Receipt of Materials  Printed/Typed Name	Signature					Month Day	Year
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	19. Discrepancy Indication Space							
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Ţ	<ol> <li>Facility Owner or Operator: Certification of receipt of hazard Item 19.</li> </ol>			inifest ex	cept as note	din [		
•	Printed/Typed Name	Signature					Date Month Day	Year
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	3. Generator's Name and Mailing Addre	088 / SC	·vices		845	5052	A Lucion	t Number	
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	5. Transpomer 1 Company Name		R IIS EPA IN NU	mber	ł	ransporter'	•		
Н	Liquid WYSTE M.	G E			D.Transp	orter's Pho	2114		
	7. Transporter 2 Company Name		B. US EPA ID Nu	mber		Transporter's Pho			
	9. Designated Facility Name and Site	Address	10. US EPA ID Nu	mber		Facility's ID			
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	CASMALIA CAL	Į	CADO2074	8.125.	H.Facility	's Phone	· • • • •	11	
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0	18 Transporter 2 Acknowledgement or F	lecsipt of Mater		A. 2	<del></del>			Date	
RTER	Printed/Typed Name		Signature	<u> </u>				Month Day	Year
^	19. Discrepancy Indication Space			<del></del>					
FACT	. J. Jisol openny moreston 3paca				·	•			
L	20. Facility Owner or Operator: Certification	n of receipt of ha	azardous materials covere	ed by this ma	anifest exc	ept as note	d in		
Y	item 19.			·	·			Date	
	Printed/Typed Name		Signature				!	Month Day	/ Year

Yellow: GENERATOR RETAINS

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	WASTE MANIFEST	PAPD Not 2 57 Docum	nifest ent No.	2. Page of	is not law.	require	he shaded are ed by Fede	
	3. Generator's Name and Mailing Address Service	: 5 Ver Cu 9135	<u>i</u>	84	55053		t Number	
	4. Generator's Phone ( -13 ) 875-2930			B. Stat	Generator's	10/6	257	
	5. Transponer 1 Company Name 6.	A CCC 33 E 44	ا سن ج	C.Stat	e Transporter's	حور ،	256	
		<u> </u>			sporter's Phor		0116-	6 23
	7. Transporter 2 Company Name 8.	US EPA ID Numbe	r 		e Transporter's Pho			$\dashv$
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	INGLEWELD, CA 40301 C.	900083644	12.Conta	iners	13.	14.	<del></del>	
G	11. US DOT Description (Including Proper Shipping Name, Hazard	d Class, and ID Number,	No.	Туре	Total Quantity	Unit Wt/Vol	I. Waste N	0.
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	LATER BOY CHIPPIET HOVE	807		K.Han	dling Codes for	Waste	s Listed Abov	•
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	15. Special Handling Instructions and Additional Information						1	
	16. GENERATOR'S CERTIFICATION: I hereby declare that the co- above by proper shipping name and are classified, packed, mark transport by highway according to applicable international and	ed, and labeled, and are ir	all resp	ects in p			Date	
	Printed/Typed Name Edw , N P, Con Jey	Signature	Ü (i.		<u></u>		Month Day	Yeer.
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T	17. Transporter 1 Acknowledgement of Receipt of Materials			Lu	Υ		Date	
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ORT	18. Transporter 2 Acknowledgement or Receipt of Materials	le:					Date	V
E	Printed/Typed Name	Signature					Month Day	Year
# <b>4</b> 0	19. Discrepancy Indication Space							
A .	20. Facility Owner or Operator: Certification of receipt of hazard Item 19.	ous materials covered by	this ma	nifest	except as note	d in	Date	
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UNIFORM HAZARDOUS WASTE MANIFEST		JS EPA ID No.	Manifest Document No.	2. Page of			he shaded a ed by Fed	
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1	WASTE MANIFEST CHOOS	US EPA ID No. 2 5-7 DOCU	anifest ment No.	2. Pag of	e 1 Informa is not law.	require	he shaded areas ad by Federal
	3. Generator's Name and Mailing Address, Servi	ces	_	457	55052	ocumen	t Number
		Valley Ca. 913.	22		te Generator's	ID.	
	4. Generator's Phone (2/3) 875-2930  5. Transporter 1 Company Name			,	te Transporter		
	Liquid Waste MAT	8. US EPA ID Numb   <i>C. P. T. S. O.O. 3 . H. I</i>	524		nsporter's Pho		
	7. Transporter 2 Company Name	8. US EPA ID Numb	er		te Transporter naporter's Pho		
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	Casmalia, Calif.	CF0.0.26.7.48		80.	U937-8	449	
	11. US DOT Description (Including Proper Shipping Name, H	azard Class, and ID Number	12.Conta	Type	13. Total Quantity	14. Unit	
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	16. GENERATOR'S CERTIFICATION: I hereby declare that t	he contents of this consignme	ent ere ful	y and a	ccurately desc	ribed	
	above by proper shipping name and are classified, packed, transport by highway according to applicable international				proper conditio	n tor	Date
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Ļ	17. Transporter 1 Acknowledgement of Receipt of Materi		ч Г.	1	uley		12 20 85 Date
AN	Printed Typed Name	Signature	Desc.	J. A	,		Month Day Year
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į	<ol> <li>Facility Owner or Operator: Certification of receipt of haltem 19.</li> </ol>	zardous materials covered !	by this ma	enifest	except as note	ed in	Data
	Printed/Typed Name	Signature					Date Month Day Year
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of California - Health and Welfare Agency
ARDOUS WASTE MANAGEMENT BRANCH
744 P Street
Accommento, CA 95814

# UNIFORM HAZARDOUS WASTE MANIFEST 1089

Department of Health Savices

1-24-84

~. Please print or type with ELITE type (12 characters per inch).

STATE ID NUMBER

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	GENERATOR NAME AND MAILING ADDRESS F/13-ht ACCRESSORY SERVICE	ئ				OCUMENT N	UMBER	
	10 cherman way			E.F	PA ID NUM			·
	AREA CODE/PHONE NUMBER / 1 1 1 275 - 2936			C181711	10016	14/11/5	F 17   1	1 1 1
	THANSFURIER NO. 1	·	VEH.	CONTAINER N			NUMBE	R
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	TRANSPORTER NO. 2/ALTERNATE TSD FACILITY	<u>-</u>	V.EH.	CONTAINER N	0	EPA IC	NUMBE	R
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			l					
	TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY		1 1		1	EPA IC	NUMBE	R
BY GENERATOR	EFF LAND FILL  10 SE FINSH FIL						,	
ENE	AREA CODE/PHONE NUMBER (213) 915-2916				100	1201617	I	
BY G	PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS	UN/N/ NUMBE		TOTAL QUANTITY	UNIT WT/VOL	CONTAIN NO. 1		ASTE DIS
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	soluble oil				10		~	
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	SPECIAL HANDLING INSTRUCTIONS							
	This is to certify that the above-named wastes are properly classified, described proper condition for transportation according to the applicable requirements of the				FPA -	ю. Г	DAY	YR.
	Printed or typed full name and signature Fda, PCDa	ley &	die	ريمي نيرين	Ray 6		Z   49	41 4
	Check if continuation sheet is used. Number of continuation sheets				/ 12			
ED IN	TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES	1 11			ATE M EC'D	0.	DAY	YR.
TO BE FILLED IN BY TRANSPORTER	Printed or typed full name and signature  TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES	· • · · · · · · · · · · · · · · · · · ·		D	ATE M	V/ +	DAY	YR.
TO B BY TR	Printed or typed full name and signature				EC'D & EPTED	.		
	DISCREPANCY INDICATION SPACE					<u> </u>		I
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### UNIFORM HAZARDOUS WASTE MANIFEST

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#### UNIFORM HAZARDOUS WASTE MANIFEST

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714-744 P Street Sacramento, CA 95814

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	proper condition for transportation according to the applicable requirements of the	Department of	Transpor	tation and the	EPA. N	10.	DAY	7 [	YR.
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Department of Health Services

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les	se print or type. (Form designed for use on elit	a /12-nitch) tengurit	Anu'	4			Sacri	iniditto, Canic	بر محمد
Ā	UNIFORM HAZARDOUS WASTE MANIFEST	II Generator's		Manifest No.	2. Page 1 of			shaded area by Fodera	
	3. Generator's Name and Mailing Add Fireh エ っこことららって	SErv			845	5054	cument	Namber	A. Salah
	11310 Sherman		•	"1, f 91352	B.State	Generator's	10.2	57	
	4. Generator's Phone ( - 13 ) 27  5. Transporter 1 Company Name - Two 1e  7. Transporter 2 Company Name	z = 2 / 3 2	6. US EPA ID	Number	C.State	rensporter's	10 3	77937	7-
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	9. Designated Facility Name and Site RHO-Chem Corl	<b>9</b> .	10. US EPA ID			DOS	364	الدوي	
	TNOISWOOD CA	11+	C 19.00093	64432	(213		76 -	6233	
 	11. US DOT Description (Including Proper	•	lazard Class, and ID No	imber) 12.Conta	ı_ İ	13. Total Quantity	14. Unit Wt/Vot	l. Waste No.	
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TANSA P	Additional Descriptions for Materials	Listed Above ZHANE		1678	K.Handlir	ng Codes for	Wastes	listed Above	
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	15. Special Handling Instructions and A	ditional Informa	tion		<u> </u>				
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	<ol> <li>GENERATOR'S CERTIFICATION: I he above by proper shipping name and are</li> </ol>	lassified, packed,	marked, and labeled, a	nd <b>are</b> in <b>a</b> ll resp	ects in pro				
	transport by highway according to applic	enoisenasiona	and national governm	·         •				Date onth Day Y	/gar
	Edwin P. Conley		de	m P.	Com	ley	_		9.4
	17. Transporter 1 Acknowledgement of I					5		Date	/mar
	Aristed/Typed Name	5	Ken	IL M	~~	<b>&amp;</b>	Ĺ	1730 8	7
	18. Transporter 2 Acknowledgement or I	Receipt of Mater						Date	
	Printed/Typed Name		Signature				L	onth Day Y	ear ·
Ť	19. Discrepancy Indication Space			<del></del>					
<u> </u>	20. Facility Owner or Operator: Certification 19.	n of receipt of h	azardous materials cov	vered by this ma	anifest exc	ept as noted	l in		
L				A		<del></del>		- Date	<del>, .</del>

Prate of California – Health and Welfare Agency
HAZARDOUS WASTE MANAGEMENT BRANCH
744° P Street

Printed or typed full name and signature

FORM NO. DHS 8022A 11/82

## 2166-01089

Department of Health Service

UNIFORM HAZARDOUS WASTE MANIFEST

124-83

Satzramento, CA 95814 STATE ID NUMBER 8 3056516 Please print or type with ELITE type (12 characters per inch). GENERATOR NAME AND MAILING ADDRESS EPA ID NUMBER AREA CODE/PHONE NUMBER SHAW WALLS IN 121
TRANSPORTER NO 1 اعلالا الحادات EPA ID NUMBER LIEBIL WASTE MONEGENENT P. F. BE1 1282 SUN Valley, Calif. 1010101191613 610101010101010101 TRANSPORTER NO. 2/ALTERNATE TSD FACILITY VEH./CONTAINER NO. TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY EPA ID NUMBER EKK HOUD TILL JOID SO ATHER AVE. TO BE FILLED IN BY GENERATOR WEST COVING 91791 (213) 965-0916 AREA CODE/PHONE NUMBER 91791 (213) 965-0916 WASTE | DI UN/NA TOTAL UNIT CONTAINER PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS NUMBER QUANTITY WT/VOL NO. TYPE CAT NO. ME Water Scluble Oil CONC. RANGE UNITS COMPONENTS UPPER LOWER Wiler SPECIAL HANDLING INSTRUCTIONS This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation MO. DAY YR. and the EPA. Printed or typed full name and signature ☐ Check if continuation sheet is used. Number of continuation sheets TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES BE FILLEI IN TRANSPORTER MO. DAY YR. DATE REC'D æ ACCEPTED Printed or typed full name and signature 13 TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES DATE DAY REC'D 요합 ACCEPTED Printed or typed full name and signature DISCREPANCY INDICATION SPACE TO BE FILLED IN BY TSDF HP 000080 Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted DATE RECEIVED & ACCEPTED in the discrepancy indication space above. Note: TSDF must complete waste EPA ID NUMBER DAY MO. number. See instructions.

GENERATOR RETAINS

SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE

### CALIFORNIA HAZARDÕUS WASTE MANIFEST STATE DEPARTMENT OF HEALTH SERVICES HAZARDOUS MATERIALS MANAGEMENT SECTION

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OFFRINT SLEARLY. 744 P STREET, SACRAMENTO, CA 95814 **► PRESS HARD** GENERATOR (GENERATOR MUST COMPLETE) (A) ALTERNATE TSD FACILITY (1) DESIGNATED TSD FACILITY (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM) (2) NAME NAME NAME EPA NO. EPA NO EPA NO. ADDRESS CITY, STATE, **ADDRESS** ADDRESS CITY, STATE, 91791 CITY, STATE COWING PHONE NO. ORDER : - / . . . PHONE NO. 2-13-945-0516 Connela PHONE NO. ORDER PLACED BY P. O. / CONTRACT NO. WEIGHT OR VOLUME U.S. DOT HAZARD CONTAINERS: NUMBER UNITS (1) U. S. DOT PROPER SHIPPING NAME 700 10- d DRUMS BAGS CARTONS WASTE TRUCK 1: 0 OTHER 7, 2 3 3 4 4 4 WASTE CATEGORY 4 1 4 4 5 GENERATING PROCESS ① EX. HAZ. WASTE PERMIT NO. CONC BANGE UNITS CONC. RANGE UNITS LIST COMPONENTS: UPPER LOWER LOWER NONHAZARDOUS MATERIAL WASTE PROPERTIES: FLAMMABLE CORROSIVE/IRRITANT REACTIVE SENSITIZER \_\_\_CARCINOGEN/MUTAGEN PHYSICAL STATE: GAS SOLID SLUDGE ( SLUBBY SPECIAL HANDLING INSTRUCTIONS: GENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA. IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U. S. COAST GUARD 1-800-424-8802. SIGNATURE OF AUTHORIZED AGENT & TITLE DATE SHIPPED TRANSPORTER (HAULER MUST COMPLETE) MAME LIQUID WASTE MANAGEMENT PICK-UP DATE C A D 0 0 0 0 7 2 8 4 ADDRESS P.O. BOX 1082 CITY STATE SUN VALLEY, CALIFORNIA 91352 PHONE NO. (213) 767-4424 SIGNATURE OF AUTHORIZED AGENT & TITLE TSD FACILITY (OPERATOR MUST COMPLETE)

PA N	O. STATE FEE	E (IF ANY)	\$		SURFACE IMPOUNDMENT	LANDFILL
) II	IDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT	r			INJECTION WELL	LAND TREATMENT
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) IF	WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FA	ACILITY	1	لنبا	RECOVERY OR REUSE	STORAGE/TRANSF
AME			•			-

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DATE ACCEPTED

FPA NO REVISED 11/80

SIGNATURE OF AUTHORIZED AGENT & TIT HP 000081

HANDLING OR DISPOSAL METHOD

RECEIVED State of California-Health and Welfare Agency ZZARDOUS WASTE MANAGEMENT BRANCH UNIFORM HAZARDOUS WASTE MANIFEST MAY 20 1983 74 P Street Sacramento, CA 95814 4-29-83 STATE ID NUMBER 8 3100707 Please print or type with ELITE type (12 characters per inch). GENERATOR NAME AND MAILING ADDRESS MANIFEST DOCUMENT NUMBER with the first of the second **EPA ID NUMBER** VEH./CONTAINER NO. TRANSPORTER NO. 2/ALTERNATE TSD FACILIT TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY EPA ID NUMBER BOUNG THOR HUE FILLED IN BY GENERATOR AREA CODE/PHONE NUMBER UN/NA UNIT CONTAINER TOTAL WASTE DIS PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS NUMBER QUANTITY WT/VOL NO. TYPE CAT NO. MET WASTE Soluble 011 WATER CONC. RANGE UNITS COMPONENTS UPPER a setable est WATEr SPECIAL HANDLING INSTRUCTIONS This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation MO. Printed or typed full name and signature A 219 in the control of ☐ Check if continuation sheet is used. Number of continuation sheets TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES BE FILLED IN MO. DAY DATE REC'D KHMILEC Printed or typed full name and signature TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES DATE MO. DAY REC'D 2 ACCEPTED Printed or typed full name and signature DISCREPANCY INDICATION SPACE 2.07 HP 000082 60 See 83078037 Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted DATE RECEIVED & ACCEPTED in the discrepancy indication space above. Note: TSDF must complete waste EPA ID NUMBER MO. 1067718161748 ORM NO. DHS-8022A 11/82

HAZARDOUS MATERIALS MANAGEMENT SECTION 744 P Street Sacramento, CA 95814

### UNIFORM HAZARDOUS WASTE MANIFEST

6-22-83

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	Edwin P. Conley		à		•	мо	. DA	Y YR.
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SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY.

# CALIFORNIA HAZARDOUS WASTE MANIFEST STATE DEPARTMENT OF HEALTH SERVICES HAZARDOUS MATERIALS MANAGEMENT SECTION 744 P STREET, SACRAMENTO, CA 95814

PRESS HARD	744 P STREET, SACRAMENTO, CA 95814	1."
GENERATOR (GENERATOR MUST COMPLETE)	① DESIGNATED TSD FACILITY	ALTERNATE TSD FACILITY
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① U. S. DOT PROPER SHIPPING NAME	U S. DOT HAZARD UN/NA WEIGHT UN CLASS I.D. NO OR VOLUME UN	ITS CONTAINERS: NUMBER
WASTE 1/ St. S. Z. Z. Z. Z. Z. Z. Z. Z. Z. Z. Z. Z. Z.	Flammable with 700 're	DRUMS BAGS CARTONS DUMP
WASTE 1/ TO V	1220	TANK OTHER
WASTE CATEGORY  LIST COMPONENTS:  CONC. F UPPER  B  A  B  A  C  C  C  C  D  WASTE PROPERTIES: PH  TOXIC  FLAMMAB  PHYSICAL STATE  SOLID  SPECIAL HANDLING INSTRUCTIONS: SLUDGE  GENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO TH  IN THE EVENT OF A SPILL CONTACT THE N  RESPONSE CENTER, U. S. COAST GUARD 1-800	PPM E PPM F PPM G PPM NONHAZARDOUS MATERIA SLUBBY GAS OTHER LES RESPIRATOR OTHER  ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIE E APPLICABLE REGULATIONS OF THE OBPARTMENT OF	CONC. RANGE UNITS UPPER LOWER  PPM PPM PPM PPM PPM PPM PPM PPM PPM P
TRANSPORTER (HAULER MUST COMPLETE)  ① NAME LIQUID WASTE MANAGEMENT  EPA NO. C A D 0 0 0 7 2 8 4 3  ADDRESS P.O. BOX 1082  CITY STATE SUN VALLEY, CALIFORNIA 91352  PHONE NO. (213) 767-4424	JOB NO.  UNIT NO  SIGNATUR	O PICK-UP DATE
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SEE REVERSE SIDES FOR INSTRUCTIONS PLEASE TYPE

# CALIFORNIA HAZARDOUS WASTE MANIFEST IIG 1 1 1983

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OR PRINT   LEARLY. PRESS HARD	HAZARDOUS MATERIA	T OF HEALTH SERVICES LS MANAGEMENT SECTI CRAMENTO, CA 95814		303 - 0	,5
GENERATOR (GENERATOR MUST COMPLETE)	③ DESIGNATED TSD	FACILITY	() ALTERN	ATE TSD FACILITY	^
ONAME FOR ACCOUNTY SETVICES EPA NO. 2700646257	_		UNDER AN APPROVED STA		GRAM)
ADDRESS // / SHET DIAN WOY CITY STATE VA VA VA VA VA VA VA	EPA NO. ( 4)  ADDRESS 22/	OPETYAT OFISHAK	PA NO. ADDRESS_		
ORDER PLACED BY ORDER 7-/		st Covins -965-0716	CITY STATE ZIP CODE PHONE NO.		
3 U. S. DOT PROPER SHIPPING NAME	U. S. DOT HAZARD CLASS	UN/NA WEIGHT	UNITS CONTAINE	RS: NUMBER	1
WASTE / / / / / / / / / / / / / / / / / / /	t/ommoble	1270 Soo	DRUMS TANK TRUCK	BAGS CARTO	DINS DUMP
D  WASTE PROPERTIES: PH  PHYSICAL STATE: SOLID SLUDGE  SPECIAL HANDLING INSTRUCTIONS: SGLOVES  GEORGE	A LOWER UNITS  PP  PP  PP  CORROSIVE/IRRI  GAS  GAS  RESPIRA	OTHER OTHER	MATERIALCA	TING PROCESS  CONC. RAN UPPER LOV  %  RCINOGEN/MUTAGEN	NER PPM PPM PPM
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TRANSPORTER (HAULER MUST COMPLETE)  (I) NAME LIQUID WASTE MANAGEMENT  EPA NO. C A D 0 0 0 7 2 8 4 3  ADDRESS P.O. BOX 1082  CITY STATE SUN VALLEY, CALIFORNIA 91352  PHONE NO. (213) 767-4424	JOB N UNIT		G I	PICK-UP DATE	AM DPM
TSD FACILITY (OPERATOR MUST COMPLETE)  ① NAME EPA NO. ② INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MAN	OUANTITY HE M		<b>7</b> // (****)	DISPOSAL METHOD: E IMPOUNDMENT	HP 00008  LANDFILL  LAND TREATMENT
② IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THI	E DESIGNATED TSD FACILIT	<b>IY</b> :	<del></del> 1 1	ENT (SPECIFY)  RY OR REUSE	STORAGE/TRANSFER
EPA NO. REVISED 11/80	<u> </u>	SIGNATURE OF	AUTHORIZED AGENT & TITLE	·-	DATE ACCEPTED

HAZARDOUS MATERIALS MANAGEMENT SECTION 744 P Street Secramento, CA 95814

### **UNIFORM HAZARDOUS WASTE MANIFEST**

(Please	print or type with ELITE type (12 characters per inch).		STATE I	NUMB	ER 82	05	236
	GENERATOR NAME AND MAILING ADDRESS FIGHT ACCESSORY SERV	ices	MA	NIFEST	DOCUMENT	NUMBE	R
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	AREA CODE/PHONE NUMBER		CATPE	06	4625	7	
	TRANSPORTER NO. 1 Liquid Waste management	VEH.	CONTAINER N	D.   	EPA ID I	NUMBE	R
	O. O. Box 108 2 SUN DILLEY COLITY TRANSPORTER NO. 2/ALTERNATE TSD FACILITY	1 1	3587	76 pg	9000	p 17 z	8 11 13
	TRANSPORTER NO. 2/ALTERNATE TSD FACILITY		<del>,       </del>		EPA ID I	UMBE	R
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}	TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY				EPA ID	IUMBEF	3
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THE GENERATOR	PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS	UN/NA NUMBER	TOTAL QUANTITY	UNIT WT/VOL	CONTAINE NO. TY	R	WASTE CAT. NO.
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	Portation according to the applicable regulations of the Department of	Transportation and	the EPA.				
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See reverse side for instructions.

Please type or print clearly. Press Hard.

VALII UNIVIA HAZANDUUD WASIL WANIFEST

State Department of Health Services
HAZARDOUS MATERIALS MANAGEMENT SECTION 744 P Street, Sacramento, CA 95814

1 Manifest 001190 Number

OCT 1 3 1983

- Francis sain

GENERATOR (GENERATOR MUST COMPLETE)  2 Name	18970 3 Design	TOO STATE DIO	grain or rede	orized to operate ral program.)	e under an	4 Alternate 1	SD Facility		`
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City, State, Zip Sign Valley					1 117	Z/ City, State,	, Zip		·····
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WASTE PROPERTIES: pH		<b></b> 9					. %		•
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GENERATOR CERTIFICATION: This is to certi applicable regulations of the Department of TranspIN THE EVENT OF A SPILL, CONT	ACT THE NATION	AL 1			l, packaged, mark		re in proper condition f	13 - 7	-y 3
RESPONSE CENTER, U.S. COAST	GUARD 1-800-424-8	802	Signature o	of Authorized Ag	gent and Title			Date Shipped	<u> </u>
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CITY, STATE, ZIP UPLAND, CAL		175	<del> </del>	Signati	ure of Authorized	Agent and little		Date	
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EPA NO. L 1 1 1 1 1 1 1 7 1 7 1 7	161714111 18	STATE FEE	E (If Any)		·	_	ction Well Land Tr	reatment	•
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IF WASTE IS HELD FOR DELIVERY ELSEWHE	RE, SPECIFY THE DESIG	NATED TSD	FACILITY		<b>T</b> .			nr v	
Designated TSD Facility Name	_,					EPA NO. L	1 1 1 1	.   _   _	1 4 4
23	ر	/ (1		1. 100°	R				
	Signature of Authorized A	gent and Titl	0				Date Accepted		

UNIFORM HAZARDOUS WASTE MANIFEST

NOV 2 2 1983

CALLIVELY Department of Health Services

714-744 P Street Sacremento, CA 95814 Please print or type with ELITE type (12 characters per inch).

83317234 STATE ID NUMBER

or type with ELTTE type (12 characters per mich).			SIAILIDIA	CIVIOLIT			<u> </u>	<u> </u>
GENERATOR NAME AND MAILING ADDRESS			N	IANIFEST	DOC	UMENT NUM	BER	
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TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY						EPA ID NU	JMBER	
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SPECIAL HANDLING INSTRUCTIONS				<u> </u>				1
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acility owner or operator: Certification of-receipt of hazardous waste covered b liscrepancy indication space above. Note: TSDF must complete waste number.			<del></del>	<del></del> , -		E RECEIVED	_ '	
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#### UNIFORM HAZARDOUS WASTE MANIFEST

Sacramento, CA 95814. 83317234 ~ f STATE ID NUMBER Please print or type with ELITE type (12 characters per inch). GENERATOR NAME AND MAILING ADDRESS SCHUICE MANIFEST DOCUMENT NUMBER Flict Faccessory EPA ID NUMBER AREA CODE/PHONE NUMBER TRANSPORTER NO. 1 VEH./CONTAINER NO. EPA ID NUMBER FERRENCE PORT TRANSPORTER NO. 2/ALTERNATE TSD FACILITY 1 1414171818 (101010101010171210191 EPA ID NUMBER TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY EPA ID NUMBER KAK KANTE II WEST COVING TITE BE FILLED IN BY GENERATOR CIMID 04:1717 15147141 AREA CODE/PHONE NUMBER ( -1) 1965-6916 CONTAINER | WASTE | DISI UN/NA TOTAL UNIT PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS NUMBER QUANTITY WT/VOL NO. | TYPE CAT. NO MET UN1993 Water Soluble oil 901 13/0/0 **CONC. RANGE** UNITS COMPONENTS UPPER LOWER PPM MALER 40 SPECIAL HANDLING INSTRUCTIONS This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA. MO. DAY Printed or typed full name and signature Edmin Criticy - dis. ☐ Check if continuation sheet is used. Number of continuation sheets TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT, OF ABOVE WASTES BE FILLED IN TRANSPORTER DATE DAY MO. REC'D 31 Printed or typed full name and signature ACCEPTED TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES DATE MQ. DAY REC'D 2 2 3 Printed or typed full name and signature **ACCEPTED** DISCREPANCY INDICATION SPACE

BE FILLED 2 ₹

HP 000089

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. **EPA ID NUMBER** See instructions.

DATE RECEIVED & ACCEPTED DAY

Printed or typed full name and signature

Please type or print clearly. Press Hard.	State Department of Health Services HAZARDOUS MATERIALS MANAGEMENT S	··
GENERATOR (GENERATOR MUST COMPLETE)	744 P Street, Sacramento, CA 95814 3 Designated TSD Facility (Authorized to operate under a approved state program or federal program.)	
2 Name Fight Marsey Sorvice	Name BKK Landfill	Name
EPA + 1 1/1/1/10/10/10/1/16/10/15/1		
Address 1500 / 10 mon Wy Phone 875-5	4BO Address 20 12 USI) NE Phone 16	Address Phone Phone
City, State, Zip Den Colley Co.	City, State, Zip WEST COMH	City, State, Zip
U.S. DOT PROPER SHIPPING NAME		NUMBER OF CONTAINERS (
WASTE CUTST Soldy C.L	1993 300 0	TYPE: DRUMS BAGS CARTONS TANK TRUCK DUMP TRUCK OTHER
6 Waste Category 222 7 Ext. Haz.	Waste Permit No. 14/A 8 Genera	ating Process
LIST COMPONENTS: CONCENT UPPER  9 A LASCALET CONCENT	TRATION RANGE LOWER UNITS LIST COMPON	CONCENTRATION RANGE
B. CIL 10		
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10 WASTE PROPERTIES: pH Toxic Flammel  11 PHYSICAL STATE: Solid Liquid Sludge Sludge SIL  12 SPECIAL HANDLING INSTRUCTIONS: Gloves Goog	urry Gas Other	14
10 WASTE PROPERTIES: pH Toxic Flammel 11 PHYSICAL STATE: Solid Liquid Sludge Sludge Sludge Sludge Sludge Sludge Sludge Sludge Sludge Sludge Sludge Special Handling Instructions: Goog	gles Respirator Other  pove named materials are properly classified, described, package EPA.  13 Y Cantal Amount of the control of the contro	ged, marked, labeled, and are in proper condition for transportation according to t
10 WASTE PROPERTIES: pH	gles Respirator Other  pove named materials are properly classified, described, package EPA.  13 Y Cantal Amount of the control of the contro	ged, marked, labeled, and are in proper condition for transportation according to the condition according to the condition acc
10 WASTE PROPERTIES: pH	gles Respirator Other  pove named materials are properly classified, described, package EPA.  NATIONAL -800-424-8802  13  Signature of Authorized Agent and	ged, marked, labeled, and are in proper condition for transportation according to t
10 WASTE PROPERTIES: pH DTOXIC Flammed 11 PHYSICAL STATE: DSOIID Fliquid Sludge SIL 12 SPECIAL HANDLING INSTRUCTIONS: Gloves Goog  GENERATOR CERTIFICATION: This is to certify that the ab- applicable regulations of the Department of Transportation and IN THE EVENT OF A SPILL, CONTACT THE RESPONSE CENTER, U.S. COAST GUARD 1  TRANSPORTER (HAULER MUST COMPLETE)	gles Respirator Other  pove named materials are properly classified, described, package EPA.  NATIONAL -800-424-8802  SERVICE  PHONE 714-983-0342  PRESPIRATION AL SIGNATURE OF Authorized Agent and	ged, marked, labeled, and are in proper condition for transportation according to the condition according to the condition acc
10 WASTE PROPERTIES: pH	gles Respirator Other  pove named materials are properly classified, described, package EPA.  NATIONAL -800-424-8802  SERVICE  PHONE 714-983-0342  PHONE 714-983-0342  Signature of Authorized Agent and Signature of Authorized Agent A	Title Date Shipped  15 PICK-UP DATE  A1 T1-0 8 0 0 8 4 1 8 4 Time  uthorized Agent and Title Date  21 HANDLING OR DISPOSAL METHOD:  Surface Impoundment  Landfill  Injection Well Land Treatment
10 WASTE PROPERTIES: pH	GERVICE  PHONE 714-983-0342  COMPLETE)  18 QUANTITY (If Messured)  19 STATE FEE (If Any)	Title  Date Shipped  15 PICK-UP DATE  At T1-0, 8, 0, 0, 8, 4, 1, 8, 4, 1 me  uthorized Agent and Title  Date  21 HANDLING OR DISPOSAL METHOD:  Surface Impoundment  Landfill
10 WASTE PROPERTIES: pH	GERVICE  PHONE 714-983-0342  COMPLETE)  19 STATE FEE (If Any)	Title Date Shipped  15 PICK-UP DATE  A T + 0   8   0   0   8   4   1   8   4   Time  Uthorized Agent and Title Date  21 HANDLING OR DISPOSAL METHOD:  Surface Impoundment Dandfill  Injection Well Land Treatment  Treatment (Specify)
10 WASTE PROPERTIES: pH	GERVICE  PHONE 714-983-0342  COMPLETE)  18 QUANTITY (If Measured)  MANIFEST AND SHIPMENT:  19 Service   General State   Genera	Title Date Shipped  15 PICK-UP DATE  A T + 0 8 0 0 0 8 4 1 1 8 4 Time  Date  21 HANDLING OR DISPOSAL METHOD:  Surface Impoundment Dandfill  Injection Well Dand Treatment  Treatment (Specify)  Recovery or Re-use Storage/Transfer  Recycle HP 00009
10 WASTE PROPERTIES: pH	GERVICE  PHONE 714-983-0342  COMPLETE)  18 QUANTITY (If Measured)  MANIFEST AND SHIPMENT:  19 Service   General State   Genera	Title  Date Shipped  15 PICK-UP DATE  At Tt-0, 8, 0, 0, 8, 4, 1, 8, 4, 1 me  Uthorized Agent and Title  Date  21 HANDLING OR DISPOSAL METHOD:  Surface Impoundment  Injection Well  Recovery or Re-use  Storage/Transfer

CALIFORNIA HAZARDOUS WASTE MANIFEST

Printed or typed full name and signature

ORM NO DHS-80224 11/82

## UNIFORM HAZARDOUS WASTE MANIFEST

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	GENERATOR NAME AND MAILING ADDRESS		1	ANIEEET O	OCUMENT NU		
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	SPECIAL HANDLING INSTRUCTIONS					-	
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ბ ₹	discrepancy indication space above. Note: TSDF must complete waste number.  See instructions.	EPA ID N	UMBER	M	10. D	AY	YR.
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Please print or type with ELITE type (12 characters per inch).

AREA CODE/PHONE NUMBER

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY

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TRANSPORTER NO. 1

Department of Health Services JAN 1 6 1984 UNIFORM HAZARDOUS WASTE MANIFEST 83317595 STATE ID NUMBER GENERATOR NAME AND MAILING ADDRESS MANIFEST DOCUMENT NUMBER John Harman Commercy **EPA ID NUMBER** VEH./CONTAINER NO. EPA ID NUMBER TRANSPORTER NO. 2/ALTERNATE TSD FACILITY

1.5 AREA CODE/PHONE NUMBER WASTE DIS CONTAINER UN/NA TOTAL UNIT PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS NO. TYPE CAT. NO. MET WT/VOL NUMBER QUANTITY CONC. RANGE UNITS COMPONENTS UPPER LOWER PPM

SPECIAL HANDLING INSTRUCTIONS

proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA. Printed or typed full name and signature

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in

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Check if continuation sheet is used. Number of continuation sheets

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES Printed or typed full name and signature

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

DATE REC'D ACCEPTED DATE

REC'D

**ACCEPTED** 

DAY DAY

EPA ID NUMBER

Printed or typed full name and signature

DISCREPANCY INDICATION SPACE

Printed or typed full name and signature

HP 000092

TO BE FILLED IN BY TSDF

BE FILLED IN TRANSPORTER

유입

BE FILLED IN BY GENERATOR

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Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number.

DATE RECEIVED & ACCEPTED

EPA ID NUMBER

SET REVERSE SIDES FOR INSTRUCTIONS PLEASE TYPE ORDRINT CLEARLY  PRESS HADD  GENERATOR (GENERATOR MUST COMPLETE)  ① NAME EPA NO. ADDRESS CILCOLO PHONE NO. ORDER PLACED BY  ORDER PLACED BY	ALIFORNIA HAZARDOUS V STATE DEPARTMENT OF HEA HAZARDOUS MATERIALS MANA 744 P STREET, SACRAMEN  3 DESIGNATED TSD FACILIT  NAME  EPA NO.  ADDRESS CITY STATE ZIP CODE PHONE NO.	ALTH SERVICES AGEMENT SECTION TO, CA 95814	363 0 02355  OALTERNATE ISD FACILITY  PROVED STATE OF FEDERAL PROGRAM)  NAME  EPA NO.  ADDRESS  CITY STATE  ZIP CODE  PHONE NO.	digetsi
CONTRACT NO				
① U. S. DOT PROPER SHIPPING NAME WASTE	U. S. DOT HAZARD UN/NG CLASS ID NO	OR VOLUME UNITS	CONTAINERS: NUMBER  DRUMS BAGS CARTONS TANK OTHER	DUMP TRUCK
B C D WASTE PROPERTIES PH TOXIC FLAMA PHYSICAL STATE SOLID LIQUID SLUDGE	PPM E PPM F PPM G	ONHAZARDOUS MATERIAL	© GENERATING PROCESS  CONC. RANGE UPPER LOWER  %  R CARCINOGEN/MUTAGEN	UNITS PPM PPM PPM
GENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT TIN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO  IN THE EVENT OF A SPILL CONTACT THE RESPONSE CENTER, U.S. COAST GUARD 1-	E NATIONAL	F THE DEPARTMENT OF TRAI	SPORTATION AND THE EPA.	O, AND ARE
TRANSPORTER (HAULER MUST COMPLETE)  (I) NAME LIQUID WASTE MANAGEMENT  EPA NO. C A D 0 0 0 7 2 8 4 3  ADDRESS P.O. BOX 1082  CITY CODE  SUN VALLEY, CALIFORNIA 91352  PHONE NO. (213) 767-4424	JOB NO UNIT NO	SS/	O PICK-UP DATE	82 0 am pm co
TSD FACILITY (OPERATOR MUST COMPLETE)  O NAME EPA NO	DESIGNATED TSD FACILITY	0.11	DUTING OR DISPOSAL METHOD: SURFACE IMPOUNDMENT LANDFIL INJECTION WELL TREATMENT (SPECIFY)	HP 000093  LL  REATMENT  GE/TRANSFER
EPA NO. AEVISED 11/80	<u> </u>	SIGNATURE OF AUTHORIZED AC	ENT & TITLE DATE	ACCEPTED

SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY.

CALIFORNIA HAZARDOUS WASTE MANIFEST
STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION

363-002538

DATE ACCEPTED

PRESS HARD	744 P STREET, SACRAMENTO, CA 95814	82
GENERATOR (GENERATOR MUST COMPLETE)	① DESIGNATED TSD FACILITY	© ALTERNATE TSD FACILITY 3-5-82
ONAME TO STATE TO ADDRESS 1/ 3/0 State To A	NAME 10	AN APPROVED STATE OR FEDERAL PROGRAM)  NAME  EPA NO.
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CONTRACT NO CONTRACT NO	PHONE NO.	PHONE NO
(9 U. S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD UN/NA WEIGHT UN CLASS I.D NO. OR VOLUME UN	ITS CONTAINERS NUMBER
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WASTE	1270 9	TANK OTHER
B C D TOXIC FLAN  PHYSICAL STATE SOLID LIQUID SLUDGE	PPM E PPM F PPM G PPM NONHAZARDOUS MATERI PPM G PPM NONHAZARDOUS MATERI PPM G PPM O	CONC. RANGE UNITS UPPER LOWER  AL
TRANSPORTER (HAULER MUST COMPLETE)  NAME LIQUID WASTE MANAGEMENT  EPA NO. C A D 0 0 0 0 7 2 8 4 3  ADDRESS P.O. BOX 1082	JOB NO. 2537 UNIT NO. 3	O PICK-UP DATE 7, 15 18 Z-
PHONE NO. (213) 767-4424		Kalled Miner
TSD FACILITY (OPERATOR MUST COMPLETE)  O NAME EPA NO.	OUANTITY IIF MEASURED STATE FEE IIF ANY S.	INJECTION WELL LAND TREATMENT
IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE NAME	S60\	TREATMENT (SPECIFY) RECOVERY OR REUSE STORAGE/TRANSFEI
EPA NO. REVISED 11/80	SIGNATURE OF AUTHOR	35/32

SIGNATURE OF AUTHORIZED AGENT & TITLE

SEE REVERSE SIDES FOR

### CALIFORNIA HAZARDOUS WASTE MANIFEST STATE DEPARTMENT OF HEALTH SERVICES HAZARDOUS MATERIALS MANAGEMENT SECTION

363 - 002691 ECEIVE
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DATE ACCEPTED

INSTRUÇT	IONS.	PLEASE	TYP
OR PRINT	CLEA	RLY.	

EPA NO REVISED 11/80

744 P STREET, SACRAMENTO, CA 95814 **PRESS HARD** 3 1982 GENERATOR (GENERATOR MUST COMPLETE) **O** ALTERNATE TSD FACILITY 1 DESIGNATED TSD FACILITY (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM) FPA NO. EPA NO. **ADDRESS** ADDRESS 2210 **ADDRESS** CITY STATE WEST COVIND CITY, STATE ORDER 12 -14-52 PHONE NO. PHONE NO. P.O. / CONTRACT NO. U S. DOT HAZARD WEIGHT (1) U. S. DOT PROPER SHIPPING NAME UNITS CONTAINERS NUMBER DRUMS BAGS CARTONS 700 WASTE Waste TANK OTHER WASTE 11/2 Ter 1270 WASTE CATEGORY 47-48 1 GENERATING PROCESS 1/4 Chi Nes EX. HAZ, WASTE PERMIT NO. CONC. RANGE UNITS CONC. BANGE UNITS LIST COMPONENTS: UPPER LOWER UPPER LOWER 10 WUSEE ni NONHAZARDOUS MATERIAL \_\_\_ FLAMMABLE CORROSIVE IRRITANT REACTIVE SENSITIZER **WASTE PROPERTIES:** PHYSICAL STATE SOLID SPECIAL HANDLING INSTRUCTIONS: GLOVES GENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U. S. COAST GUARD 1-800-424-8802. TRANSPORTER | (HAULER MUST COMPLETE) NAME LIQUID WASTE MANAGEMENT C A D 0 0 0 0 7 2 ADDRESS P.O. BOX 1082 CITY STATE SUN VALLEY, CALIFORNIA 91352 PHONE NO. (213) 767-4424 € HP 000095 TSD FACILITY (OPERATOR MUST COMPLETE) O NAME HANDLING OR DISPOSAL METHOD STATE FEE OF ANY EPA NO. SURFACE IMPOUNDMENT LANDFILL INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT INJECTION WELL LAND TREATMENT TREATMENT (SPECIFY) 1 IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY RECOVERY OR REUSE

SEE REVERSE SIDES FOR INSTRUCTIONS PLEASE TYPE OR PRINT CLEARLY.

## **CALIFORNIA HAZARDOUS WASTE MANIFEST**

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

363 - 002733 4-27-82

DATE ACCEPTED

**PRESS HARD** 

GENERATOR MUST COMPLETE	① DESIGNATED TSD FACILITY	ALTERNATE TSD FACILITY
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D LIST COMPONENTS: CONC. F	AANGE UNITS	PPPER LOWER
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PHONE NO. (213) 767-4424	· · · · · · · · · · · · · · · · · · ·	A Clarity of the
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	@ QUANTITY OF MEASURED SEC = 2778 3.	HP 000096
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IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DE	SIGNATED TSD FACILITY	TREATMENT (SPECIFY) ' RECOVERY OR REUSE STORAGE: TRANSFER
NAME	Oa /	RECOVERY OR REUSE STORAGE THANSFER
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REVISED 11:80	SIGNATURE OF AUTHORIZED A	GENT & TITLE DATE ACCEPTED

SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY.

CALIFORNIA HAZARDOUS WASTE MANIFEST
STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

363-002877

DATE ACCEPTED

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PRESS HARD	744 P STREET, SACRAMENTO, CA 95814	5-26-82			
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# SEE REVERSE SIDES FOR INSTRUCTIONS, PLEASE TYPE OR PRINT CLEARLY.

CALIFORNIA HAZARDOUS WASTE MANIFEST
STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET SACRAMENTO. CA 95814

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DATE ACCEPTED

SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE 57 2 PRESS HARD	CALIFORNIA HAZARDO STATE DEPARTMENT OF HAZARDOUS MATERIALS I 744 P STREET, SACRA		<b>363 - 0</b> 029	99 82	
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WASTE // /	4		TANK TRUCK	OTHER	
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© LIST COMPONENTS .	ONC. RANGE UNITS	, C	O GENERAL.	CONC. BANG	
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D	PPM	NONHAZARDOUS M	ATERIAL	%	
	AMMABLE CORROSIVE/IRRITAL	NT REACTIVE	SENSITIZERCA	RCINOGEN/MUTAGEN	
	SLURRY GAS	OTHER		<del></del>	
SPECIAL HANDLING INSTRUCTIONS	GOGGLES RESPIRATO	R OTHER			······································
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IN THE EVENT OF A SPILL CONTACT RESPONSE CENTER, U. S. COAST GUARD		10 MINISIGNAT	TURE OF AUTHORIZED AGENT	e Carrier Kigo Control	DATE SHIPPED
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CITY STATE SUN VALLEY, CALIFORNIA 91352					
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SIGNATURE OF AUTHORIZED AGENT & TITLE

SEE REVERSE SIDES FOR INSTRUCTIONS, PLEASE TYPE OR PRINT CLEARLY.

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CALIFORNIA HAZARDOUS WASTE MANIFEST STATE DEPARTMENT OF HEALTH SERVICES HAZARDOUS MATERIALS MANAGEMENT SECTION 744 P STREET, SACRAMENTO, CA 95814

GENERATOR MUST COMPLETE)	① DESIGNATED TSD FACILITY	<ul><li>ALTERNATE TSD FACILITY</li></ul>	17
ONAME A SOLF FOR TEST	(AUTHORIZED TO OPERATE	E UNDER AN APPROVED STATE OR FEDERAL PR	ROGRAM)
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CITY, STATE, COLOR FOR STATE OF STATE	ADDRESS 210 17 Z SUIT	ADDRESS	
PHONE NO. <u>27.57 + 24.434</u>	ZIP CODE 102 CT CONTAIN		
ORDER PLACED BY DATE 1/9/	02 PHONE NO. (7/3) 985-091	E PHONE NO	
CONTRACT NO.			
1 U. S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD UN/NA WEIGHT	ME UNITS CONTAINERS: NUMBER	
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WASTE CATEGORY - 4 4	● EX. HAZ. WASTE PERMIT NO.	■ GENERATING PROCESS	Dog or Shape
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S COMETIMOLING INSTRUCTIONS L. JOEOVES ES GOOD	LES MESPIRATOR UIA	EH	
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SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY.

PRESS HARD

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## CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

363	-	n	n	3	3	3	2
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DATE ACCEPTED

GENERATOR (GENERATOR MUST COMPLETE) (A) ALTERNATE TSD FACILITY (1) DESIGNATED TSD FACILITY . (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM) NAME FPA NO EPA NO. ADDRESS CITY, STATE, **ADDRESS** ADDRESS CITY, STATE, CITY, STATE SAST PHONE NO. PHONE NO. ORDER PLACED BY P.O. / CONTRACT NO WEIGHT OR VOLUME CONTAINERS: NUMBER UNITS (1) U. S. DOT PROPER SHIPPING NAME DUMP 5425 DWUMS BAGS CARTONS WASTE TANK OTHER WASTE **● GENERATING PROCESS** → C. P. C. **WASTE CATEGORY** (7) FX HAZ WASTE PERMIT NO. CONC. RANGE UNITS CONC RANGE UNITS LIST COMPONENTS: UPPER LOWER LOWER NONHAZARDOUS MATERIAL WASTE PROPERTIES: CORROSIVE/IRRITANT REACTIVE SENSITIZER CARCINOGEN/MUTAGEN SLURRY SOLID SLUDGE C 45 SPECIAL HANDLING INSTRUCTIONS: GENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U. S. COAST GUARD 1-800-424-8802. SIGNATURE OF AUTHORIZED AGENT & TITLE DATE SHIPPED TRANSPORTER (HAULER MUST COMPLETE) M NAME LIQUID WASTE MANAGEMENT JOB NO PICK-UP DATE C A D 0 0 0 0 7 2 8 4 3 UNIT NO EPA NO. P.O. BOX 1082 ADDRESS CITY STATE SUN VALLEY, CALIFORNIA 91352 PHONE NO. (213) 767-4424 SIGNATURE OF AUTHORIZED AGENT & FITLE HP 000100 TSD FACILITY (OPERATOR MUST COMPLETE) HANDLING OR DISPOSAL METHOD -ÇANDFILL SURFACE IMPOUNDMENT INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT INJECTION WELL LAND TREATMENT TREATMENT (SPECIFY) IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY RECOVERY OR REUSE STORAGE/TRANSFER EPA NO.

SIGNATURE OF AUTHORIZED AGENT & TITLE

SEE BEVERSE SIDES FOR CALIFORNIA HAZARDOUS WASTE MANIFEST INSTRUCTIONS, PLEASE TYPE OR PRINT CLEARLY HAZARDOUS MATERIALS MANAGEMENT SECTION PRESS HARD 744 P STREET SACRAMENTO, CA 95814 GENERATOR GENERATOR MUST CONST (A) ALTERNATE TSD FACILITY (1) DESIGNATED TSD FACILITY (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM) (2) NAME NAME BKK EPA NO FPA NO ADDRESS / ADDRESS CITY, STATE, CITY STATE INCS & COVING WE PHONE NO. ( 2/ 3) PHONE NO P.O. / CONTRACT NO. U. S. DOT HAZARD UN/NA WEIGHT OR VOLUME UNITS CONTAINERS NUMBER (3) U. S. DOT PROPER SHIPPING NAME DUMP DRUMS BAGS CARTONS WASTE 162576 611 Crs. OTHER WACTE WASTE CATEGORY (2) EX. HAZ. WASTE PERMIT NO. GENERATING PROCESS CONC. BANGE CONC. RANGE UNITS UNITS LIST COMPONENTS: . . UPPER UPPER LOWER LOWER d 486 1 1 10 NONHAZARDOUS MATERIAL TOXIC FLAMMABLE CORROSIVE BRITANT BEACTIVE SENSITIZER 1 PHYSICAL STATE SOLID SLUDGE SLURRY GAS STORE SPECIAL HANDLING INSTRUCTIONS: [ JGLOVES RESPIRATOR GENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U. S. COAST GUARD 1-800-424-8802. TRANSPORTER (HAULER MUST COMPLETE) MAME LIQUID WASTE MANAGEMENT JOB NO. PICK-UP DATE C A D 0 0 0 0 7 2 8 UNIT NO ADDRESS P.O. BOX 1082 ZIP CODE SUN VALLEY, CALIFORNIA 91352 PHONE NO. (213) 767-4424 SIGNATURE OF AUTHORIZED AGENT & TITLE TSD FACILITY | TOPERATOR MUST COMPLETED HP 000101 1 NAME HANDLING OR DISPOSAL METHOD. EPA NO. SURFACE IMPOUNDMENT LANDFILL INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT \_ INJECTION WELL LAND TREATMENT TREATMENT (SPECIFY) IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY RECOVERY OR REUSE STORAGE/TRANSFER NAME

SIGNATURE OF AUTHORIZED AGENT & TITLE

DATE ACCEPTED

EPA NO. \_\_\_\_

. DHS 8022 (7/82)

## UNIFORM HAZARDOUS WASTE MANIFE NOV 1 0 1982

HP 000102

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	GENERATOR NAME AND MAILING ADDRESS				CUMENT NL	MBEF	1
	FLIGHT ACCESSORY SERVICES					<u> </u>	
- ; [	11310 Sherman Way, Sun Valley Cali	f. 91352	į			!	
	AREA CODE/PHONE NUMBER (213) 875-2930				6 2 5 7		
!	TRANSPORTER NO. 1	VEH	CONTAINER NO	D	EPA ID NU	MBER	
	Liquid Waste Management Inc. P.O.Box 1082 Sun Valley CA 91352		0.7		, -		
	Ligura was teravatanagement acity	////	<u> </u>	CAL	0 0 0 0 : 0 EPA ID NU		
	mag da di mas da di managoni di di cici i i				EPA ID NO	MBER	
- { }			1 1 1 1	, ,			
	TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY	<del></del>			EPA ID NUI	MBER	<u> </u>
	BKK						<del></del>
	2210 Azusa Rd. West Covina Calif.	91791					
ОВ	AREA CODE/PHONE NUMBER (213) 965-0916			CLAT	0 6 7 8	:615	5:7:4:9
BY THE GENERATOR	PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS	S UN/NA NUMBER	TOTAL		CONTAINER	1	WASTE
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GE	***			_			
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F	Waste Water NA		1		1		
	waste water	1 2 7 0	1:0:0:Q	_	TIC	2   2	2:2
2	COMPONENTS			CONC.	RANGE LOWER	1	JNITS
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	Waste Water			90	88	ક	
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	SPECIAL HANDLING INSTRUCTIONS					<u>!l</u>	
			•				
	This is to certify that the above-named materials are properly classi	fied, described, packa	iged, marked and l	abeled, and	are in proper o	onditi	on for trans-
	portation according to the applicable regulations of the Department	of Transportation and	of the EPA.				
	Ellis Elkington	\$ . <b>.</b>			MO.	DAY	YR.
	PRINTED OR TYPED FULL NAME AND SIGNATURE	1.14 C. 1.	<u> </u>		1 0	210	8 2
	CHECK IF CONTINUATION SHEET IS USED. NUMBER OF	CONTINUATION SH	EETS				
	TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABO				DATE REC	'D &	ACCEPTED
TO BE FILLED IN BY TRANSPORTER							
BE FILLED IN TRANSPORTER				.7	MO.	DAY	YR.
OR	PRINTED OR TYPED FULL NAME AND SIGNATURE AL RE	KT RAWING	· (1/1/24	J		1.	51-
ILI VSP	PRINTED OR TYPED FULL NAME AND SIGNATURE / / RECEIPT OF ABO	VE MATERIALS	<del></del>	<del></del>	DATE RE	3.D.	ACCEPTED
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	DISCREPANCY INDICATION SPACE						
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BE BY	Facility owner or operator: Certification of receipt of hazardous in the discrepancy indication space above Note: TSDF must compl	material covered by the eterminate of the etermi	nis manifest except e instructions.	as noted	DATE REC	.D <b>&amp;</b> \	CCEPTED
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•	KAY SIMPSON COLY LULL-PAR	`M-A-	EPA ID NUMBE	R	MO.	DAY	YR.
	PRINTED OR TYPED FULL NAME AND SIGNATURE	<u> </u>	10167781	6124	7 1110	9	<u> الحل الما</u>
Origina	al-White Disposer send to DHS: Green-Hauler: Yellow-Dis	noser · Pink _Gener	ator	•			_

INSTRUCTIONS, PLEASE TYPE OR PRINT CLEARLY.

CALIFORNIA HAZARDOUS WASTE MANIFEST
STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

363 –
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DATE ACCEPTED

PRESS HARD	744 P STREET, SACRAMENTO, CA 95814	17,-0			
GENERATOR (GENERATOR MUST COMPLETE)	① DESIGNATED TSD FACILITY	OALTERNATE TSD FACILITY JAN 1 3 1983			
1 NAME A STATE OF THE STATE OF	AUTHORIZED TO OPERATE UNDER AN A	APPROVED STATE OR FEDERAL PROGRAM			
EPA NO. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7.	NAME / K	_ NAME			
ADDRESS // // ADDRESS	EPA NO	EPA NO.			
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PHONE NO. ORDER PLACED BY ORDER	21P CODE 1003 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ZIP CODE			
P.O. DATE	PHONE NO. 2575 25				
1 U. S. DOT PROPER SHIPPING NAME	U.S DOT HAZARD UN/NA WEIGHT UNITS	CONTAINERS NUMBER			
WASTE	PRINCIPLE RIT SCC 741	DRUMS BAGS CAHTONS TRUCK			
WASTE		TANK			
WASTE CATEGORY // / / / / / / / / / / / / / / / / /	O EX. HAZ. WASTE PERMIT NO	GENERATING PROCESS			
	RANGE UNITS	CONC. RANGE UNITS			
A _ ( _ / _ / _ / _ / _ / _ / _ / _ / _ /	PPM E				
B	N F				
<u>C</u>					
WASTE PROPERTIES. PH TOXIC SELAMMA	NONHAZARDOUS MATERIAL				
	ABLE CORROSIVE TRRITANT REACTIVE SENSITE	ZERCARCINOGEN/MUTAGEN			
SPECIAL HANDLING INSTRUCTIONS: GLOVES					
	Joseph Landson				
GENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE	HE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, D	DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE			
IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO 1					
IN THE EVENT OF A SPILL CONTACT THE RESPONSE CENTER, U. S. COAST GUARD 1-8	<u> </u>	MORIZED AGENT & TITLE DATE SHIPPED			
TRANSPORTER (HAULER MUST COMPLETE)	// //				
10 NAME LIQUID WASTE MANAGEMENT	JOB NO	O PICK UP DATE			
EPA NO. C A D 0 0 0 0 7 2 8 4 3	UNIT NO.	TIME AM PN			
ADDRESS P.O. BOX 1082					
PHONE NO. (213) 767-4424	• 600 C/SN	w			
PHONE NO. 12107 707 4424		AUTHORIZED AGENT & TITLE			
	010				
TSD FACILITY (OPERATOR MUST COMPLETE)	70±3613	2.89 HP 000103			
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IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE I  NAME	DESIGNATED ISD FACILITY	RECOVERY OR REUSE STORAGE/TRANSFE			
EPA NO.	0	$N = \frac{1}{2}$			
REVISED 11/80	SIGNATURE OF AUTHORIZED	AGENT & TITLE DATE ACCEPTED			

HAZARDOUS MATERIALS MANAGEMENT SECTION 744 P Street

## UNIFORM HAZARDOUS WASTE MANIFEST

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	Flight Occasion Service		A ID NUMBER				
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	Rho-Chem Corp.  TRANSPORTER NO. 2/ALTERNATE TSD FACILITY				EPA ID NU	MBER	<del>7</del>
	PILL						
	BKK Corporation			47	pp677		49
	TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY		91. 91.5	-	EPA ID NU	MBER	
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	SPECIAL HANDLING INSTRUCTIONS SEGGLES & Sloves					· · · <del></del>	
	Goggles & Fronts	.4.					
			7				
	This is to certify that the above-named materials are properly classified,	described, packa	ged, marked and la	beled, an	nd are in proper o	condition	for trans-
	portation according to the applicable regulations of the Department of Tr	ransportation and	the EPA.				_
	230	IN P. C	onley		MO.	DAY	YR.
	PRINTED OR TYPED FULL NAME AND SIGNATURE COLL	one P	only		12	15	8 P
1	CHECK IF CONTINUATION SHEET IS USED. NUMBER OF CON	MONTH SH	EETS	•			
<b>×</b>	TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE N	MATERIALS	_ / (	2024	DATE REC	'D & AC	CEPTED
TO BE FILLED IN BY TRANSPORTER	Lina & Copper (/	-		50	7		
O F	LUCIANO OFFETT FICE	(1/10)	Loor "	_	MO.	DAY	YR.
BE FILLED IN TRANSPORTER	PRINTED OR TYPED FULL NAME AND SIGNATURE TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE N	MATERIALS			DATE REG	C'D & AC	CEPTED
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	DISCREPANCY INDICATION SPACE						- <del>-</del>
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וררו גסו							
BE FILLE	Facility owner or operator: Certification of receipt of hazardous mater			as noted	DATE REC	D & ACC	EPTED
TO BE FILLED IN BY TSDF	In the discrepancy indication space above. Note: TSDF must complete w	aste number, See	instructions.				-
<b>⊢</b> -	·	<u> </u>	EPA ID NUMBER	3	MO.	DAY	YR.
	PRINTED OR TYPED FULL NAME AND SIGNATURE			للل			

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### CALIFORNIA HAZARDOUS WASTE MANIFEST STATE DEPARTMENT OF HEALTH SERVICES HAZARDOUS MATERIALS MANAGEMENT SECTION

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DATE ACCEPTED

PRESS HARD	HAZARDOUS MATERIALS MANAGEMENT SECTION 744 P STREET, SACRAMENTO, CA 95814	
ENERATOR (GENERATOR MUST COMPLETE)	① DESIGNATED TSD FACILITY	ALTERNATE TSD FACILITY
NAME A NO. A DO TO TO TO TO TO TO TO TO TO TO TO TO TO	AUTHORIZED TO OPERATE UNDER A  NAME  EPA NO.  ADDRESS  CITY STATE  ZIP CODE  PHONE NO.  (AUTHORIZED TO OPERATE UNDER A  PARTICLE AUTHORIZED  (AUTHORIZED TO OPERATE UNDER A  PARTICLE AUTHORIZE	NAME  PPA NO.  ADDRESS  CITY, STATE ZIP CODE  PHONE NO.
① U. S. DOT PROPER SHIPPING NAME	U. S. DOT HAZARD UN/NA WEIGHT UNIT	TS CONTAINERS NUMBER
WASTE CONTRACTOR (1992)	COFFESSIVE UN 1757 3,000 col	DRUMS BAGS CARTONS DUMP
WASTE		TANK OTHER
LIST COMPONENTS.  PPPER  LIST COMPONENTS.	PPM E  PPM F  PPM G  PPM NONHAZARDOUS MATERIA  MABLE CORROSIVE IRRITANT REACTIVE SENS  SLURRY GAS OTHER	CONC. RANGE UNITS UPPER LOWER  PPM PPM PPM PPM
NERATOR CERTIFICATION: THIS IS TO CERTIFY THAT T PROPER CONDITION FOR TRANSPORTATION ACCORDING TO		D. DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE TRANSPORTATION AND THE EPA.
IN THE EVENT OF A SPILL CONTACT THE RESPONSE CENTER, U. S. COAST GUARD 1:8		AUTHORIZED AGENT & TITLE DATE SHIPPED
NAME LIQUID WASTE MANAGEMENT  A NO. C A D 0 0 0 7 2 8 4 3  DRESS P.O. BOX 1082  V. STATE SUN VALLEY, CALIFORNIA 91352  ONE NO. (213) 767-4424	JOB NO. UNIT NO	PICK-UP DATE 1 2 2 AM DPM
NAME A NO. INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MAN	@ QUANTITY (IF MEASURED) 20  © STATE FEE (IF ANY) \$	HP 000105  HANDLING OR DISPOSAL METHOD  SURFACE IMPOUNDMENT LANDFILL  INJECTION WELL LAND TREATMENT  TREATMENT (SPECIFY)
IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE	DESIGNATED TSD FACILITY	RECOVERY OR REUSE STORAGE/TRANSFER

SIGNATURE OF AUTHORIZED AGENT & TITLE

FRESS HARD

CALIFORNIA HAZARDOUS WASTE MANIFEST STATE DEPARTMENT OF HEALTH SERVICES HAZARDOUS MATERIALS MANAGEMENT SECTION 744 P STREET, SACRAMENTO, CA 95814

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NERATOR (GENERATOR MUST COMPLETE)	① DESIGNATED TSD FACILITY				ALTERNATE TSD FACILITY			
NO. CATALOGIA SERVICES  NO. CATALOGIA STATE  PRESS JULY AND LOAY  STATE SLIP AND LOAY  STATE SLIP AND LOAY  OFFICE PLACED BY PROPER  PRACT NO. 12 22 22 22 22 22 22 22 22 22 22 22 22	·			<b>ア</b> ク	PPROVED STATE OR FEDERAL PROGRAM)  NAME CASMACUA DISPUSAL  EPA NO. CAUCED DISPUSAL  ADDRESS MATHERITY FOR COMMENCE CASMACUA  PHONE NO. SISTEMATOR STATEMATOR			
) U. S. DOT PROPER SHIPPING NAME	U S. DOT HAZARD	UN/NA I.D. NO	WEIGHT R VOLUME	UNITS	CÓNTAINERS	NUMBER		
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WASTE				100	TANK	OTHER		
					, week			
WASTE CATEGORY  LIST COMPONENTS:  OTHER STATE  WASTE PROPERTIES  PH  TOXIC  FLAMMABLE  F	CORROSIVE/IRRI SLURRY GAS ES RESPIRA	PM E PM F PM G PM NÖÑHÄZ ITANT	ARDOUS MATACTIVE	TERIAL	RIBED, PACK	CONC. FUPPER  % NOGEN/MUTAGE	PPM PPM	
IN THE EVENT OF A SPILL CONTACT THE NA RESPONSE CENTER, U. S. COAST GUARD 1-800-		0	Kon	1 50	HIZED AGENT &	T. T. E	DATE SHIPPED	
RANSPORTER (HAULER MUST COMPLETE)  NAME LIQUID WASTE MANAGEMENT  NO C A D 0 0 0 7 2 8 4 3  DRESS P.O. BOX 1082  CODE SUN VALLEY, CALIFORNIA 91352  DINE NO. (213) 767-4424	JOB N UNIT			ALONE OF AUT	9 PIC TIM		117/6) DAM SPM	
NAME INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFES  IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DES	SIGNATED TSD FACILIT		Z \ Z \ Z \ Z \ Z \ Z \ Z \ Z \ Z \ Z \	HANI	DLING OR DIS SURFACE IN INJECTION TREATMEN RECOVERY	T (SPECIFY)	HP 000106  LANDFILL LAND TREATMENT  STORAGE/TRANSFER	
ISED 11/80	,	SIGN	TURE OF AUT	HORIZED AGE	NT & TITLE		DATE ACCEPTED	

### CALIFORNIA HAZARDOUS WASTE MANIFEST STATE DEPARTMENT OF HEALTH SERVICES HAZARDOUS MATERIALS MANAGEMENT SECTION 744 P STREET, SACRAMENTO, CA 95814

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ENERATOR (GENERATOR MUST COMPLETE)	① DESIGNATED TSD	FACILITY		ALTERNATE TSD FACILITY			
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(5) U. S. DOT PROPER SHIPPING NAME	U. S. DOT HAZARD CLASS	UN/NA WE	IGHT OLUME UNITS	CONTAINERS NUMBER			
WASTE			29	DRUMS BAGS	CARTONS DUMP		
WASTE				TANK OTHER			
WASTE CATEGORY  LIST COMPONENTS:  CONC. BA  UPPER  LIST COMPONENTS:  CONC. BA  UPPER  LIST COMPONENTS:  LIST CONC. BA  UPPER  LIST CONC. BA  UPPER  LIST CONC. BA  UPPER  LIST CONC. BA  UPPER  LIST CONC. BA  UPPER  TOXIC FLAMMABLE  PHOSE CALL HANDLING INSTRUCTIONS: SLUDGE GOGGLE  ENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE A  PROPER CONDITION FOR THANSPORTATION ACCORDING TO THE	ANGE UNITS LOWER  CORROSIVE IRRI SLURRY GAS  RESPIR	OTHER	OOUS MATERIAL	ER CARCINOGEN/MUTA	ED & LABELED, AND ARE		
IN THE EVENT OF A SPILL CONTACT THE N. RESPONSE CENTER, U. S. COAST GUARD 1-800-	ATIONAL	0	16/ki	HORIZED AGENT & TITLE	2/21/51. DATE SHIPPED		
RANSPORTER (HAULER MUST COMPLETE)  NAME LIQUID WASTE MANAGEMENT  A NO: C A D 0 0 0 7 2 8 4 3  IDRESS P.O. BOX 1082  Y STATE SUN VALLEY, CALIFORNIA 91352  ONE NO. (213) 767-4424	JOB N TIMU ————————————————————————————————————	200	SIGNATURE OF	O PICK UP DATE	PM		
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VISED 11/80		SIGNATU	RE OF AUTHORIZED A	GENT & TITLE	DATE ACCEPTED		

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PRESS HARD

## CALIFORNIA HAZARDOUS WASTE MANIFEST STATE DEPARTMENT OF HEALTH SERVICES

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

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NAME TO PROPERTY OF THE PROPER	O DESIGNATED TSD FACILITY  NAME BK  EPA NO. CADCET AS AT  ADDRESS 2310 AFREA AT  ZIP CODE  PHONE NO. 9 65 - 67/1	OALTERNATE TSD FACILITY  DER AN APPROVED STATE OR FEDERAL PROGRAM)  NAME (A) (A) (A) (A) (A) (A) (A) (A) (A) (A)
3 U. S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD UN/NA WEIGHT CLASS I.D NO. OR VOLUME	UNITS CONTAINERS NUMBER
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WASTE	• /	TANK:) OTHER
WASTE PROPERTIES  PH  TOME  TOME  AMMABLE  PHYSICAL STATE  SOLID  SLUDGE  SPECIAL HANDLING INSTRUCTIONS.  GLOVES  GOGGLE  NERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE A PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE  IN THE EVENT OF A SPILL CONTACT THE NA	PPM E  PPM F  PPM G  PPM NONHAZARDOUS MAT  SLURRY GAS OTHER  RESPIRATOR OTHER  BOVE NAMED MATERIALS ARE PROPERLY CLASS APPLICABLE REGULATIONS OF THE DEPARTMENT  ATIONAL	SENSITIZER CARCINOGEN/MUTAGEN  SIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE
RESPONSE CENTER, U. S. COAST GUARD 1-800-4 RANSPORTER (HAULER MUST COMPLETE) NAME LIQUID WASTE MANAGEMENT	JOB NO	OP PICK-UP DATE
NO C A D 0 0 0 7 2 8 4 3  DRESS P.O. BOX 1082  (STATE SUN VALLEY, CALIFORNIA 91352  DNE NO. (213) 767-4424	UNIT.NO CO	TIME AM PM
	SIGN	ATURE OF AUTHORIZED AGENT & TITLE
NAME NO INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST  IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESI  ME	IGNATED TSD FACILITY	## HP 000108  The proposal method landfill land treatment injection well treatment (specify) recovery or reuse storage/transfer
ISED 11/80	SIGNATURE OF AUTH	HORIZED AGENT & TITLE DATE ACCEPTED

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CALIFORNIA HAZARDOUS WASTE MANIFEST STATE DEPARTMENT OF HEALTH SERVICES HAZARDOUS MATERIALS MANAGEMENT SECTION

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DATE ACCEPTED

PRESS HARD	744 P STREET, SACRAMENTO, CA 95814	·
NERATOR AGENERATOR MUST COMPLETE	① DESIGNATED TSD FACILITY	ALTERNATE TSD FACILITY
NO. [1] 10 6 4 6 2 7 7 RESS 1310 SHETTM AN IN STATE SUN VALVEY CH. 913 NE NO	NAME BK CORP  EPA NO. CADO 67 78 674 9  ADDRESS 22 LO AZMSA AND  CITY STATE WEST COVINA  PHONE NO. 965-05 11	APPROVED STATE OR FEDERAL PROGRAM)  NAME CACMALIA DISPOSAL  EPA NO. CADO D 7981 25  ADDRESS NA ROAD  CITY STATE CAS MALIA OA  PHONE NO. 805-737-8446
U.S. DOT PROPER SHIPPING NAME	U. S. DOT HAZARD UN/NA OR VOLUME UNITS	CONTAINERS: NUMBER  DRUMS BAGS CARTONS DUMP TRUCK
VASTE		TANK TRUCK OTHER
SPECIAL HANDLING INSTRUCTIONS: GLOVES	PPM F PPM G PPM G PPM NONHAZARDOUS MATERIAL  FLAMMABLE CORROSIVE/IRRITANT REACTIVE SENSITE  SLUDGE SLURRY GAS OTHER  GOGGLES RESPIRATOR OTHER	
IN THE EVENT OF A SPILL CONT		Plating Foresan 3/23/61
RESPONSE CENTER, U. S. COAST G	JUANU 1-800-424-8802. SIGNATURE OF AU	THORIZED AGENT & TITLE . DATE SHIPPED
NAME LIQUID WASTE MANAGEMENT NO. C A D 0 0 0 0 7 2 8 4 3 PRESS P.O. BOX 1082 STATE SUN VALLEY, CALIFORNIA 91352 NE NO. (213) 767-4424	UNIT NO. Z  Omus K	PICK-UP DATE 1135 TIME 3-23-81 DAM DPM
NAME NO. SIGNIFICANT DISCREPANCIES BETWEEN TO THE STATE OF THE STATE O	STATE FEE (IF ANY) S	HP 000109  HANDLING OR DISPOSAL METHOD:  SURFACE IMPOUNDMENT LANDFILL  INJECTION WELL LAND TREATMENT  TREATMENT (SPECIFY)  RECOVERY OR REUSE STORAGE/TRANSFER

SIGNATURE OF AUTHORIZED AGENT & TITLE

## EE REVERSE SIDES FOR NSTRUCTIONS, PLEASE TYPE OR PRINT CLEARLY:

# CALIFORNIA HAZARDOUS WASTE MANIFEST STATE DEPARTMENT OF HEALTH SERVICES HAZARDOUS MATERIALS MANAGEMENT SECTION 744 P STREET, SACRAMENTO, CA 95814

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PRESS HARD

ENERATOR (GENERATOR MUST COMPLETE)	(1) DESIGNATED TSD FACIL	ITY	ALTERNATE TSD FACILITY	
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IONE NO	CITY, STATE,	COVINA	CITY, STATE. CASANALI	1 (1
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(1) U. S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD UN/I	NA WEIGHT	CONTAINERS: NUMBER	
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PHYSICAL STATE SOLID LIQUID SLUDGE	1 1 1	HER	· ·	
SPECIAL HANDLING INSTRUCTIONS: GLOVES GOGGL	ES RESPIRATOR	OTHER		
ENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE	ABOVE NAMED MATERIALS A	RE PROPERLY CLASSIFIED, DE	SCRIBED, PACKAGED, MARKED &	LABELED, AND ARE
PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE	APPLICABLE REGULATIONS	OF THE DEPARTMENT OF TRAI	SPORTATION AND THE EPA.	1 51
IN THE EVENT OF A SPILL CONTACT THE N		Kon Ipple	Phatin Foreman	_ 4 25 81
RESPONSE CENTER, U. S. COAST GUARD 1-800	424-8802.	SIGNATURE OF AUTH	ORIZED AGENT & TITLE	DATE SHIPPED
TRANSPORTER (HAULER MUST COMPLETE)			`	
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NAME LIQUID WASTE MANAGEMENT	JOB NO		1 PICK UP DATE	
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PCODE SUN VALLEY, CALIFORNIA 91352	and the book of the set of	and the second of the second o		,
IONE NO. (213) 767-4424	1 THE LOCAL CO.	2,200	mill Fanne	7
	and the second second		SUTHORIZED AGENT & TITLE	
TSD FACILITY (OPERATOR MUST COMPLETE)	A STATE OF THE STA	Complete Commence of the Comme		UD 000444
and the second s	A THE STATE OF THE	<ul> <li>A september of the property of the september of the control of the september o</li></ul>		HP 000110
	O QUANTITY MEABURE	D)	INDLING OR DISPOSAL METHOD:	<b>7</b>
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INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFE	ST AND SHIPMENT	<del></del>	INJECTION WELL	LAND TREATMENT
Jan Jan Jan Jan Jan Jan Jan Jan Jan Jan	A CONTRACTOR OF THE SECOND	1 (1 x x x 1)	TREATMENT (SPECIFY)	<del></del>
) IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DE	in a region of the property of the second of	لــ	_ RECOVERY OR REUSE	STORAGE/TRANSFER
AME		A .		
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### CALIFORNIA HAZARDOUS WASTE MANIFEST STATE DEPARTMENT OF HEALTH SERVICES HAZARDOUS MATERIALS MANAGEMENT SECTION

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PRINT CLEARLY.	HAZARDOUS MATERIA	T OF HEALTH SERVICES LS MANAGEMENT SECT CRAMENTO, CA 95814			/	20
ENERATOR (GENERATOR MUST COMPLETE)	① DESIGNATED TSD	FACILITY	(e	ALTERNATE TSD FAC	Ϋ́	
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SIGNATURE OF AUTHORIZED AGENT & TITLE

SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY. PRESS HARD

CALIFORNIA HAZARDOUS WASTE MANIFEST
STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

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GENERATOR (GENERATOR MUST COMPLETE)	① DESIGNATED TSD FACILITY	ALTERNATE TSD FACILITY
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EE REVERSE SIDES FOR CALIFORNIA HAZARDOUS WASTE MANIFEST 363 - 01373VSTRUCTIONS, PLEASE TYPE STATE DEPARTMENT OF HEALTH SERVICES R PRINT CLEARLY. HAZARDOUS MATERIALS MANAGEMENT SECTION PRESS HARD 744 P STREET, SACRAMENTO, CA 95814 GENERATOR IGENERATOR MUST COMPLETE) (1) DESIGNATED TSD FACILITY ( ALTERNATE TSD FACILITY (AUTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM) ) NAME PA NO. NAME NAME DDRESS EPA NO. EPA NO. ITY STATE **ADDRESS** ADDRESS IP CODE CITY, STATE, CITY, STATE HONE NO 1 RDER PLACED BY PHONE NO. PHONE NO O. / ONTRACT NO. U.S. DOT HAZARD (3) U. S. DOT PROPER SHIPPING NAME UNITS CONTAINERS: NUMBER DUMP DRUMS RAGS WASTE an CARTONS OTHER WASTE TAUCK WASTE CATEGORY ① EX. HAZ. WASTE PERMIT NO. (1) GENERATING PROCESS CONC BANGE CONC RANGE UNITS UNITS LIST COMPONENTS I IDDE R LOWER UPPER LOWER NONHAZARDOUS MATERIAL 9 WASTE PROPERTIES - PH FLAMMABLE CORROSIVE/IRRITANT REACTIVE SENSITIZER CARCINOGEN/MUTAGEN ) PHYSICAL STATE SOLID - LIOUID SLUDGE SLURRY 3) SPECIAL HANDLING INSTRUCTIONS: GLOVES ENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE AROVE NAMED MATERIALS ARE PROPERLY CLASSIFIED. DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U. S. COAST GUARD 1-800-424-8802. SIGNATURE OF AUTHORIZED AGENT & TITLE DATE SHIPPED TRANSPORTER (HAULER MUST COMPLETE) NAME LIQUID WASTE MANAGEMENT JOB NO C A D 0 0 0 0 0 7 2 8 4 UNIT NO P.O. BOX 1082 **DDRESS** SUN VALLEY, CALIFORNIA 91352 HONE NO. (213) 767-4424 SIGNATURE OF AUTHORIZED AGENT & TITLE (2 TSD FACILITY (OPERATOR MUST COMPLETE) HP 000113 ) NAME 1 QUANTITY IIF MEASURED HANDLING OR DISPOSAL METHOD TATE FEE HE ANY SURFACE IMPOUNDMENT LANDFILL **☀ INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT** INJECTION WELL LAND TREATMENT TREATMENT (SPECIFY) RECOVERY OR REUSE ) IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY STORAGE/TRANSFER

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CALIFORNIA HAZARDOUS WASTE MANIFEST
STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

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DATE ACCEPTED

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CALIFORNIA HAZARDOUS WASTE MANIFEST
STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

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DATE ACCEPTED

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### SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE OR PRINT CLEARLY.

CALIFORNIA HAZARDOUS WASTE MANIFEST STATE DEPARTMENT OF HEALTH SERVICES HAZARDOUS MATERIALS MANAGEMENT SECTION

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// CALIFORNIA HAZARDOUS WASTE MANIFEST

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57210 CALIFORNIA HAZARDOUS WASTE MANIFEST STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814

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PRESS HARD		CRAMENTO, CA 95814		<u> </u>
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3 U. S. DOT PROPER SHIPPING NAME	U.S. DOT HAZARD CLASS	UN/NA WEIGHT I.D. NO OR VOLUME UN	TTS CONTAINERS NUMBER	
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ADDRESS P.O. BOX 1082	·		The same of the sa	<del>/                                    </del>
CITY, STATE SUN VALLEY, CALIFORNIA 91352		$(x \mid y)$	$C_{ij}$	
PHONE NO. (213) 767-4424	<u> </u>		Service Con	pt Carrier
			RE OF AUTHORIZED AGENT & TITLE	
TSD FACILITY (OPERATOR MUST COMPLETE)	(i·	(8)	•	HP 000118
O NAME	1 QUANTITY OF ME	EASUREDI 12076	HANDLING OR DISPOSAL METHOE	): :
EPA NO. TENDENCE DE LA COMPANION DE LA COMPANI	O STATE FEE HE A	NYI S )EE	SURFACE IMPOUNDMENT	LANDFILL
ME INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFES	T AND SHIPMENT	193	INJECTION WELL	LAND TREATMENT
	<del>,</del>		TREATMENT (SPECIFY)	
IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DES	SIGNATED TSD FACILIT	Y	RECOVERY OR REUSE	STORAGETRANSFER
NAME	<u> </u>	· Call	•• [4]	1144
EPA NO. LA LA LA LA LA LA LA LA LA LA LA LA LA	. <del>v</del>	SIGNATURE OF AUTHOR	ZED AGENT & TITLE	DATE ACCEPTED

OR PRINT CLEARLY	FORNIA HAZARDOUS WASTE MANIFEST STATE DEPARTMENT OF HEALTH SERVICES JAZARDOUS MATERIALS MANAGEMENT SECTION 744 P STREET, SACRAMENTO, CA 95814	363 - 02014
GENERATOR (GENERATOR MUST COMPLETE)	① DESIGNATED TSD FACILITY	<b>④</b> ALTERNATE TSD FACILITY
ONAME  EPA NO.  ADDRESS CITY STATE ZIP CODE  PHONE NO  ORDER PLACED BY CONTRACT NO.  ORDER  ORDER  ORDER  ORDER  DATE  ORDER  ORDER  DATE  ORDER  ORDER  ORDER  ORDER  DATE  ORDER  ORDE	AUTHORIZED TO OPERATE UNDER AN AP  NAME	PROVED STATE OR FEDERAL PROGRAMI  NAME  EPA NO.  ADDRESS  CITY STATE ZIP CODE  PHONE NO.
U. S. DOT PROPER SHIPPING NAME WASTE	U.S. DOT HAZARD UN/NA OR VOLUME UNITS	CONTAINERS: NUMBER  DRUMS BAGS CARTONS DUMP TRUCK TRUCK OTHER
B C D  WASTE PROPERTIES: PH TOXIC FLAMMABLI PHYSICAL STATE SOLID LIQUID SLUDGE  SPECIAL HANDLING INSTRUCTIONS GLOVES COGGLI	PPM E  PPM F  PPM G  PPM NONHAZARDOUS MATERIAL  E CORROSIVE IRRITANT REACTIVE SENSITIZE  SLURRY GAS OTHER  ES RESPIRATOR OTHER	
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TRANSPORTER (HAULER MUST COMPLETE)  NAME LIQUID WASTE MANAGEMENT  EPA NO. C A D 0 0 0 0 7 2 8 4 3  ADDRESS P.O. BOX 1082  CITY STATE SUN VALLEY, CALIFORNIA 91352  PHONE NO. (213) 767-4424		PICK UP DATE AM PM
TSD FACILITY (OPERATOR MUST COMPLETE)  O NAME  EPA NO.	T AND SHIPMENT	HP 000119  INDLING OR DISPOSAL METHOD:  SURFACE IMPOUNDMENT   LANDFILL  INJECTION WELL   LAND TREATMENT  TREATMENT (SPECIFY)  RECOVERY OR REUSE   STORAGE TRANSFER
NAME EPA NO. REVISED 11/80	SIGNATURE OF AUTHORIZED AC	SENT & TITLE DATE ACCEPTED

SEE REVERSE SIDES FOR INSTRUCTIONS. PLEASE TYPE 5 7260

## CALIFORNIA HAZARDOUS WASTE MANIFEST

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET. SACRAMENTO CA 95814

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BRESS HARD GENERATOR (GENERATOR MUST COMPLETE) **(A)** ALTERNATE TSD FACILITY (1) DESIGNATED TSD FACILITY (ALTHORIZED TO OPERATE UNDER AN APPROVED STATE OR FEDERAL PROGRAM) EPA NO. NAME EPA NO. ADDRESS EPA NO CITY STATE, ADDRESS ADDRESS CITY STATE CITY, STATE, " All My acres PHONE NO ZIP CODE ORDER ORDER PLACED BY PHONE NO PHONE NO. P. O. / CONTRACT NO UN/NA WEIGHT (1) U. S. DOT PROPER SHIPPING NAME UNITS CONTAINERS NUMBER DUMP WASTE RAGS DRUMS CARTONS CNI TANK OTHER WASTE **WASTE CATEGORY** ① EX. HAZ. WASTE PERMIT NO.\_\_\_\_\_\_ ( ) GENERATING PROCESS CONC. BANGE CONC RANGE UNITS UNITS LIST COMPONENTS UPPER LOWER UPPER LOWER NONHAZARDOUS MATERIAL PPM FLAMMABLE CORROSIVE PRITANT REACTIVE SENSITIZER WASTE PROPERTIES CARCINOGEN/MUTAGEN 11) PHYSICAL STATE SOLID TO LIQUID SLUBGE SLUBBY GAS (2) SPECIAL HANDLING INSTRUCTIONS. MOLOVES CONCLES GENERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED & LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE EPA. Of the Comment seed IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U. S. COAST GUARD 1-800-424-8802. SIGNATURE OF AUTHORIZED AGENT & TITLE DATE SHIPPED TRANSPORTER (HAULER MUST COMPLETE) M NAME LIQUID WASTE MANAGEMENT C A D 0 0 0 0 7 2 8 FPA NO P.O. BOX 1082 ADDRESS CITY STATE SUN VALLEY, CALIFORNIA 91352 PHONE NO. (213) 767-4424 SIGNATURE OF AUTHORIZED AGENT & TITLE TSD FACILITY | (OPERATOR MUST COMPLETE) HP 000120 1 QUANTITY IIF MEASURED! " 1 1 5 5 NAME HANDLING OR DISPOSAL METHOD: S ( STATE FEE UF ANY SURFACE IMPOUNDMENT LANDFILL 连 INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT .... LAND TREATMENT INJECTION WELL TREATMENT (SPECIFY) RECOVERY OR REUSE STORAGE/TRANSFER IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY EPA NO. 9E VISED 11/80 SIGNATURE OF AUTHORIZED AGENT & TITLE DATE ACCEPTED

# SEE REVERSE SIDES FOR INSTRUCTIONS, PLEASE TYPE OR PRINT CLEARLY

# CALIFORNIA HAZARDOUS WASTE MANIFEST STATE DEPARTMENT OF HEALTH SERVICES HAZARDOUS MATERIALS MANAGEMENT SECTION 744 P STREET. SACRAMENTO. CA 95814

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DNAME /AICH I KING A SIPPICKS	·		OPERATE U	NDER AN AP	PROVED STAT	E OR FEDERAL	PROGRAM)
EPA NO.	NAME /	J. 64-24	<del>}</del>		NAME		
ADDRESS 11316 SHULLINGTON WAY	EPA NO.		11/2/2		EPA NO.		
CITY, STATE SUN WILLEY, CA. 91352	_ ADDRESS	1. 1.	1 . 11 00	1.19	ADDRESS		
PHONE NO STATE TO STA	CITY, STATE	1 10 200	- 13 to 1 to 1	<u> </u>	CITY, STATE		· · · · · · · · · · · · · · · · · · ·
ORDER PLACED BY ORDER 13	PHONE NO.				PHONE NO		<u> </u>
CONTRACT NO.							
① U. S. DOT PROPER SHIPPING NAME	U S. DOT HAZARD	UN/NA	WEIGHT OR VOLUME	UNITS	CONTAINER	IS NUMBER	
WASTE	CLASS	1.D. NO.	3 000	gal	DRUMS		CARTONS DUMP
WASTE	-			1	TANK	OTHER	, mock
					THOCK		
D WASTE CATEGORY PARTIES SCHOCE	● EX. HAZ. WAS	TE PERMIT N	0		@ GENERATI	NG PROCESS	
D LIST COMPONENTS: CONC. P	ANGE UNITS					CONC	RANGE UNITS
A Chiconic	PPI	м Е					PPM
B Arickic	PP	м F					NPPM
C CAD	V   PPI	м G					NPPM
D	\ \   PPI		ZARDOUS MA	ATERIAL			%
	LE CORROSIVE IRRI	TANT .	REACTIVE	SENSITIZE	A CAR	CINOGEN/MUTAG	EN
	SLURRY GAS	OTHER					
SPECIAL HANDLING INSTRUCTIONS:	.ES RESPIRA	NTOR	OTHER.	<del> </del>			
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RESPONSE CENTER, U. S. COAST GUARD 1-800	F424-88UZ.		SIGNAT	URE OF AUTHO	DRIZED AGENT	S TITLE	DATE SHIPPED
TRANSPORTER (HAULER MUST COMPLETE)		_					
MAME LIQUID WASTE MANAGEMENT	IOP N	(S)			60 B)	CV LIB DATE -	
	JOB N UNIT:			<del></del>	(5) PI	ME -	Tan Plan
PA NO. [C   A   D   O   O   O   7   2   8   4   3   ADDRESS P.O. BOX 1082	UNIT	NO	•		•	ME	
CITY STATE SUN VALLEY, CALIFORNIA 91352		1 1 1	11				
PHONE NO. (213) 767-4424	<u> </u>		1 m				
			SIG	NATURE OF A	UTHORIZED AG	ENT & TITLE	×
						/ / /	
TSD FACILITY (OPERATOR MUST COMPLETE)		_	- 11	1	~ B (	140	HP 000121
D NAME	1 QUANTITY IIF ME	EASUREDI 🗀 🛂	7.14	Ø HA		SPOSAL METHO	
EPA NO.	STATE FEE (IF A	NY1 S ==	774		_	IMPOUNDMENT	
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				_	}	NT (SPECIFY)	
D IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DE	SIGNATED TSD FACILIT	Υ	. 1	L	RECOVER	Y OR REUSE	STORAGE/TRANSFER
VAME		$\sim M/2$				· · · ·	
PA NO.	<u> </u>	<u> </u>	<u> </u>			·	
1E VISED 11/80		\$IG	NATURE OF AL	ITHORIZED AG	ENT & TITLE		DATE ACCEPTED

## E REVERSE, SIDES FOR ISTRUCTIONS. PLEASE TYPE R PRINT CLEARLY.

A NO.

# CALIFORNIA HAZARDOUS WASTE MANIFEST STATE DEPARTMENT OF HEALTH SERVICES

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PRESS HARD		S MANAGEMENT SECTION RAMENTO, CA 95814	l	
ENERATOR (GENERATOR MUST COMPLETE)	① DESIGNATED TSD I	FACILITY	• ALTERNATE TSD F	ACILITY
NAME A NO.  DRESS V. STATE CODE ONE NO DER PLACED BY NTRACT NO.	NAME	ORIZED TO OPERATE UN	EPA NO.	DERAL PROGRAMI
3 U. S. DOT PROPER SHIPPING NAME	U. S. DOT HAZARD CLASS	UN/NA WEIGHT	UNITS CONTAINERS NUME	ER
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NAME LIQUID WASTE MANAGEMENT A NO. C A D 0 0 0 0 7 2 8 4 3 DDRESS P.O. BOX 1082	) A BOL 1 TINU	<del></del>		TE JOY AM PM
IV. STATE. SUN VALLEY, CALIFORNIA 91352 IONE NO. (213) 767-4424	<u> </u>	SIĞ	NATURE OF AUTHORIZED AGENT & TITL	
NAME A NO.  INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANI  IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE	(	s 20.01	HANDLING OR DISPOSAL I  SURFACE IMPOUND  INJECTION WELL  TREATMENT (SPEC  RECOVERY OR RECOVERY OR RECOVERY	MENT LANDFILL LAND TREATMENT

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CALIFORNIA HAZARDOUS WASTE MANUE SET IVED

STATE DEPARTMENT OF HEALTH SERVICES
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P STREET, SACRAMENTO, CA 95814 JAN 2 9 1981

NAME PARKER TERTER NO. CATALOR SHERING LATER STATE STATE SORE STATE NE NO 177 - 2730 DER PLACED BY SATER SATER STATE ORDER SATER STATE ORDER SATER STATE ORDER SATER STATE ORDER SAT	ODÉSIGNATED TSD FACILITY  (AUTHORIZED TO OPERATE UNDER AN AP  NAME BY K CANDELL C  EPA NO. CAD UCT 78 C7 47  ADDRESS 7210 AZUSA AVE  CITY STATE W COUNT A  PHONE NO. 905-09/6			ALTERNATE TSD FACILITY  PROVED STATE OF FEDERAL PROGRAM  NAME PROVINCE PROVINCE  EPA NO. CORREST NOTE PROVINCE  CITY STATE PROVINCE  PHONE NO.					
9.U. S. DOT PROPER SHIPPING NAME	U. S. DOT HAZARD CLASS	UN/NA	WEIGHT OR VOLUME	UNITS	CONTAINERS	NUMBER			
WASTE 6// 57.0 0/C	NUME	1.0. NO.	1000 66		DRUMS	BAGS	CARTONS	DUMP	
WASTE			7.77		TANK TRUCK	OTHER			
WASTE CATEGORY  LIST COMPONENTS  WASTE PROPERTIES  PH  TOXIC  FLAMMAB  PHYSICAL STATE  SOLID  LIQUID  SLUDGE  SPECIAL HANDLING INSTRUCTIONS:  GLOVES  GOGG  VERATOR CERTIFICATION: THIS IS TO CERTIFY THAT THE ROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE IN THE EVENT OF A SPILL CONTACT THE IN RESPONSE CENTER, U. S. COAST GUARD 1-800	LOWER  PPP PPP SILE CORROSIVE/IRRI SLURRY GAS LES RESPIRA  ABOVE NAMED MATER E APPLICABLE REGULA  NATIONAL	M E M F M G M NONHA TANT OTHER	AZARDOUS M.  REACTIVE DYNER  ROPERLY CLA	SSIFIED OF	SCRIBED, PACK	INOGEN/MUT	KED & LABE	UNITS	PPM PPM
NAME LIQUID WASTE MANAGEMENT  NO. C A D 0 0 0 7 2 8 4 3  PRESS P.O. BOX 1082  STATE SUN VALLEY, CALIFORNIA 91352  INE NO. (213) 767-4424	JOB N TINUT		9 NE 510	MATURE OF A	(§) PIC		1-8-	<i>S</i> /	<u></u> РМ
NAME NO. INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFE  IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECILIFIED  /E	ÉSIGNATED TSO FACILIT	NYI		2/4	SURFACE IN INJECTION TREATMEN RECOVERY	POSAL MET MPOUNDMEN WELL TISPECIFY	NT LAN	HP DFILL D TREATM	
NO.	0	SIG	NATURE OF AL	THORIZED AC	SENT & TITLE	<del></del>		ATE ACCEPT	€D.

# CALIFORNIA LIQUID WASTE HAULER RECORD STATE WATER RESOURCES CONTROL BOARD/STATE DEPARTMENT OF HEALTH

JANE WALK RESOURCES CONTROL	DOARD/STATE DETARTMENT OF FIELD
CODE NO.	363- 4523
NAME:	
Aviation Hydraulics	Name (print or type): LIQUID WASTE MANAGEMENT
11310 Sharman Way	Business Address: P. O. BOX 1082 SUN VALLEY CALIFORNIA 913-2 Code No.
Sun Valley Ca. 91352	(Number) (Sfeet) (City) I om Telephone Number: (213) 767-4424 Pick Up:
PO 4 12020B 041	State Liquid Waste Hauler's Registration No. (if applicable):
CONTACT	and the second s
875-2930	
TYPE OF PROCESS WHICH PRODUCES WASTE ELECTRO PLATING	Vehicle: se vacuum truckbarrels, flatbed, other
(Examples: metal plating, equipment cleaning, oil drilling Code No.	The described waste was hauled by me to the disposal
wastewater treatment, pickling bath, petroleum refining)	facility named below and was accepted.  I certify (or declare) under penalty of
AND AND A CASE OF THE AND A CONTROL OF THE AND A CO	perjury that the foregoing is true and correct.
CHECK TYPE OF WASTE 8 If fink bottom sediment	Signature of gurnorized agent and title
1 2 actid solution 9 5 01/4	
2 2 alkaline solution 10 drilling mud 3 2 pesticides 11 contaminated soil and sand	
4 paint sludge 12 cannery waste	Name (print or type):
5 solvent 13 datex waste	Site Address: Code No.
6 a tetraethyl lead sludge	
7 chemical toilet wastes 15 lightine	The hauler above delivered the described waste to this disposal facility and it was an acceptable
other (specify)	material under the terms of RWOCB requirements, State Department of Health regulations, and local restrictions.
Code No.	1416
(Examples: Hydrochloric acid, lime, caustic sada, phenolics, solvents	Quantity measured at site (if applicable):
(list), metals (list) organics (list), cyanide)	HANDLING METHOD(S):
concentration % ppm·/	recovery
The state of the s	treatment (specify)
3 Sitter of the state of the st	(Examples incineration, neutralization, precipitation) code no.
3 - 3 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 -	disposal (specify) pond spreading landfill injection well
water or late to the same of t	other (specify)
	16 mars is held for all the half street have provide final location.
	If waste is held for disposal elsewhere specify final location:  Disposal Date:
	I certify (or declare) under penalty of
none Toxic Thommable Corresive Corporate	perjury that the foregoing is true and correct.
- barrels - other	Signature of authorized agent and title
BULK VOLUME, 3 Co Gol Gol (42 gol) kpacify)	The site operator shall submit a legible copy of each completed Record to the State Repartment of Health with monthly fee reports.
CONFAINERS: NUMBER drums corrons bags (specify)	with monthly tee reports.
PHYSICAL STATE: Solid Solid Studges & Studges	DOT PROPER SHIPPING NAME
SPECIAL HANDLING INSTRUCTIONS (IF ANY)	DUI PROPER SHIPPING NAME
The waste is described to the best of my ability and it was delivered to a licensed liquid waste in hauter (if applicable).	

facertify (or declare) under penalty of perjury

that the foregoing is true and correct.

FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING

HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.

# CALIFORNIA LIQUID WASTE HAULER RECORD

		CODE NO.	363-	4280
M TAKE	·	14denulics	Name (print or type): LIQUID WASTE MANAGEMENT	
PICK UP ADDRESS.	11310 - LIFE	PMAR WAY	Business Address: P. O. BOX 1082 SUN VALLEY, CALIFORNIA 9135	2 Code No.
en en en en en en en en en en en en en e		DATE	(Number) (Street) / - (Cina	B on
	SUN UAlley	1-41.342 10	Telephone Number: (213) 767-4424 Pick Up: (Date)	/ 100 pm
TEL NO./	(212) 805	1-91.342 10- 2930	State Liquid Waste Hauler's Registration No. (if applicable):	$\Rightarrow$
P. O. NO.	(2,3)01			
Type OF DE	OCESS WHICH BRODUCES WASTE	MACHINE WORK	Vehicle:barrels,flatbed,other	(specify)
🌦 (Examples	: metal plating, equipment cleaning er treatment, pickling bath, petroleu	, oil drilling	Cede No.  The described waste was hauled by me to the disposal facility named below and was accepted.	4
			I certify (or declare) under penalty of perjury that the foregoing is true and	<i>O</i> :
ि 🖸	HECK TYPE OF WASTE	8 tank bottom sediment	correct.	ne
5, py	acid solution	• <b>3 3 3</b>	Signature of Mutholized ag	ent and title
	alkaline solution	10 drilling mud		
ā.	pesticides	11 contaminated soil and s	and ( )	
	4 🧱 paint sludge	12 Cannery waste	Name (print or type):	Code No.
0.00	solvent	13 latex waste	Site Address: 6474 White Inc. 1 Grant	Coor No.
	6 🌃 tetraethyl lead sludge	14 <b>mud and water</b>		
	7 🔝 chemical toilet wastes	15 brine	The hauler above delivered the described waste to this disposal facility and it was	an acceptable
	other (specify)		material under the terms of RWOCB requirements, State Department of Health regula restrictions.	tions, and loca
	(Examples: Hydrochloric (list), metals (list) organic	acid, lime, caustic soda, phenolics, solvents	Quantity measured at site (if applicable):	·):
	(101)/ 1101010 (101)/ 0190110	concentration	HANDLING METHOD(S):	,
	VATEL	lower upper	% ppm recovery	, [————————————————————————————————————
1	014 1	111	treatment (specify)	
2			(Examples incineration, neutralization, precipitation)	code no.
	·		disposal (specify) pond spreading landfill injection with	
20c	·		other (specify)	code no.
	S			
	s		M waste is held for disposal elsewhere specify final location:	
			Disposal Date: 100 17 1 100 100 100 100 100 100 100 10	F
			I certify (or declare) under penalty of perjury that the foregoing is true and	•
nl.	4 Inone	toxic II flammable corrosive	explosive correct.	<del></del>
			Signature of authorized of	
BULKY	OLUME: Jal.	tons borrets (42 gal) (4	ther The site operator shall submit a legible copy of each completed Record to the State Designation with monthly fee reports.	priment of Healt
CONTA	AINERS:		ecify)	
PHYSIC	AL STATE: (NUMBER)	d 👪 liquid 🎤 🛗 sludge 🔛 🙀	ther yelly)	
SPECIA	L HANDLING INSTRUCTIONS (IF A	NY) NONC	DOT PROPER SHIPPING NAME	i i
	ì		tin 0	.0012E - ∰
a facilities of	to alcounth and an about book of more on	bility and it was delivered to a licensed liqu	HP 0	00125 🎆
The waste hauter (if a		punk and a seasoned of a Season of		

Signature of authorized agent and title

that the foregoing is true and correct.

FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.

10-5-79

STATE WATER RESOURCES CONTROL BOARD/STATE DEPARTMENT OF HEALTH

THE RESERVED FOR THE PROPERTY OF THE PARTY O CODE NO Aviation Hydrraulics LIQUID WASTE MANAGEMENT Name (print or type): 11310 Sherman Way P. O. BOX 1082 SUN VALLEY, CALIFORNIA 91352 **Business Address:** (Number) Sun Valley Ca. 91352 Telephone Number: (213) 767-4424 PO.# 12970E 011 343 State Liquid Waste Hauler's Registration No. (if applicable) 875-2950 No. of Loads or Trips P. O. NO. TYPE OF PROCESS WHICH PRODUCES WASTE Code No. The described waste was hauled by me to the disposal (Examples: metal plating, equipment cleaning, oil drilling facility named below and was accepted. wastewater treatment, pickling bath, petroleum refining) I certify (or declare) under penalty of GRANT STRUCTURE OF THE STATE OF THE STRUCTURE OF THE STRU perjury that the foregoing is true and correct. CHECK TYPE OF WASTE 8 at tank bottom sediment Signature of authorized agent and title oil. 🚁 acid solution drilling mud 2 Alkaline solution contaminated soil and sand pesticides. 4 🔯 paint sludge cannery waste 5 Will solvent latex waste tetraethyl lead sludge mud and water chemical toilet wastes brine... The hauler above delivered the described waste to this disposal facility and it was an acceptable material under the terms of RWOCB requirements, State Department of Health regulations, and local other (specify), restrictions. Code No. Quantity measured at site (if applicable): \_ \_State fee (if any): (Examples: Hydrochloric acid, lime, caustic soda, phenolics, solvents (list), metals (list) organics (list), cyanide) HANDLING METHOD(S): concentration recovery disposal (specify) 💀 pond 🝱 spreading 🖾 landfill 🔯 injection well other (specify)\_ If waste is held for disposal elsewhere specify final location Disposal Date: I certify (or declare) under penalty of perjury that the foregoing is true and correct. Signature of authorized agent and title The site operator shall submit a legible copy of each completed Record to the State Department of Health with monthly fee reports. DOT PROPER SHIPPING ALA SRECIAL HANDLING INSTRUCTIONS (IF ANY) The waste is described to the best of my ability and it was delivered to a licensed liquid waste hauler (if applicable).

certify (or declare) under penalty of perjury

that the foregoing is true and correct.

FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.

HP 00(

# CALIFORNIA LIQUID WASTE HAULER RECORD STATE WATER RESOURCES CONTROL BOARD/STATE DEPARTMENT OF HEALTH

WASTE (Must be filled by producer)	HAULER OF WASTE (Must be filled by haules) 363-3942
A VIATION MYDENULICS	Name (print or type):  LIQUID WASTE MANAGEMENT
DORESS. 11110 AMAN WAY	Business Address: P. O. BOX 1082 SUN VALLEY, CALIFORNIA 91352 Code No
DATE	(Number) (Street) (Crfy) am Telephone Number: (213) 767-4424 Pick Up: (Date)
TEL NO./ CONTACT:	State Liquid Waste Hauler's Registration No. (if applicable): 363
P O NO -	Job No.:No. of Loads or Trips;Unit No.:
	Vehicle:barrels,flatbed,other(specify)
TYPE OF PROCESS WHICH PRODUCES WASTE Code No.  (Examples: metal plating, equipment cleaning, oil drilling wastewater treatment, pickling bath, petroleum refining)	The described waste was hauled by me to the disposal facility named below and was accepted.
SESCRIPTION OF WASTE (Must be filled by producer)	I certify (or declare) under penalty of perjury that the foregoing is true and
CHECK TYPE OF WASTE 8 ank bottom sediment	correct.
1 🗖 acid solution 9 🖾 oil	· Signature of authorized agent and title
2 alkaline solution 10 drilling mud	DISPOSER OF WASTE (Must be filled by disposer)
3 pesticides 11 contaminated soil and sand	
4 paint sludge 12 cannery waste	Name (print or type):Code No
5 solvent 13 🛅 Tatex waste 6 tetraethyl lead sludge 14 🔣 mud and water	Site Address:
7 chemical tailet wastes 15 brine	
other (specify)	The hauler above delivered the described waste to this disposal facility and it was an acceptable material under the terms of RWOCB requirements, State Department of Health regulations, and local restrictions.
(Examples: Hydrochloric acid, lime, caustic soda, phenolics, solvents (list), metals (list) organics (list), cyanide)	Quantity measured at site (if applicable):State fee (if any):
concentration % ppm	HANDLING METHOD(S):
lower upper	recovery
	treatment (specify) (Examples: incineration, neutralization, precipitation) code no.
3	disposal (specity) pond spreading landfill injection well
4	other (specify)
5	Gode no.
	If waste is held for disposal elsewhere specify final location:
	Disposal Date:
HAZARDOUS PROPERTIES OF WASTE  pH  none  toxic  flammable  corrosive explosive	I certify (or declare) under penalty of perjury that the foregoing is true and correct.
pH Corrosive corrosive explosive	Signature of authorized agent and title
BULK VOLUME:	The site operator shall submit a legible copy of each completed Record to the State Department of Health with monthly fee reports.
	DOT
SPECIAL HANDLING INSTRUCTIONS (IF ANY)	DOT PROPER SHIPPING NAME
he waste is described to the best of my ability and it was delivered to a licensed liquid waste	HP 000127

t certify (or declare) under penalty of perjury that the foregoing is true and correct.

FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.

## CALIFORNIA LIQUID WASTE HAULER RECORD

STATE WATER RESOURCES CONTROL BOARD/STATE DEPA

RYMENT OF HEALTH		
	`\$	<sup>363</sup> -3612
The state of the s		つりてに

Avio	tion Hy O Shorm	drr	ulics	ł
Sun	Valley	Ca.	91352	

CODE NO.

TEL NO / 875-2930

P. O. NO.	
# DUDE OF DECESS WHICH DECESSOR WAS A TO THE OWN OF THE OWN OWN OF THE OWN OWN OWN OWN OWN OWN OWN OWN OWN OWN	
TYPE OF PROCESS WHICH PRODUCES WASTE	

CHECK TYPE OF WASTE

brine

Code No.

(Examples: metal plating, equipment cleaning, oil drilling wastewater treatment, pickling bath, petroleum refining)

## A CONTRACTOR OF WASHINGTON

1	74	acid solution
2	螏	alkaline solution
3	<b>(1)</b>	pesticides
4		paint sludge

5 🞇 solvent

6 📆 tetraethyl lead sludge 7 (a) chemical toilet wastes 10 drilling mud 11. contaminated soil and sand cannery waste 13 latex waste mud and water

8 stank bottom sediment 📑

other (specify).

(Examples: Hydrochloric acid, lime, caustic soda, phenolics, solvents (list), metals (list) organics (list), cyanide)

	CORCU	itration	- % ≥	ppm '
The state of State of	lower	upper		
2. Chromin and				
3 Canata and				1945
1 Thinks				887
5 3	<del></del>			
0				

PHYSICAL STATE: SPECIAL HANDLING INSTRUCTIONS (IF ANY)

The waste is described to the best of my ability and it was deliver interior (if applicable).

certify (or declare) under penalty of perjury that the foregoing is true and correct.

Signature of authorized agent and title

usiness Address: P. O. BOX 1082 SUN VALLEY, CALIFO (Number) Plephane Number: (213) 767-4424	
usiness Address: P. O. BOX 1082 SUN VALLEY, CALIFO (Number: (213) 767-4424 (South Up) (Date)	RNIA 91352 Code
elephane Number: (213) 767-4424 (Core)	KI 11.7 7 1002
(Date)	(City)
(1) 11 (1) (1) (1) (1) (1) (1) (1) (1) (	7Time:
ate Liquid Waste Hauler's Registration No. 18 application	363
ob No:	Unit No.:
ehicle: Vacuum truck Comets of flatbed,	other
	(specify)
The described waste was hauled by me to the disposal facility named below and was accepted.	
I certify (or declare) under penalty of	10005
perjury that the foregoing is true and correct.	
1	of authorized agent and titl
Description As a first term of the contract of	
ame (ariot or bons). Cooks (CAK)	ГТ
(print of 1/pe):	Code
to Address: Loting Willer Taken	
he hauler above delivered the described waste to this disposal faci	ility and it was an accept
naterial under the terms of RWOCB requirements, State Department constrictions.	or regime regulations, disc
vantity measured at site (if applicable):	State fee (if any)
30.8	
HANDLING METHOD(S):	
recovery	
Irectment (specify)	
(Examples: incineration, neutralization, precipitation)	code n
disposal (specify) pond spreading landfill	injection well
other (specify)	
	code.n
waste is held for disposal elsewhere specify final location:	· · · · · · · · · · · · · · · · · · ·
Disposal Date:	J. K. FIZING
certify (or declare) under penalty of perjury that the foregoing is true and	
correct. Signature	of authorized agent and titl
	•

DOT	<b>PROPER</b>	<b>SHIPPING</b>	NAME
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FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.